DIOCESE OF RALEIGH

Level B Volunteer - Volunteer who is supervised by Level C personnel.

The Catholic Diocese of Raleigh appreciates your willingness to share your faith, gifts and skills. Providing safe and secure places for fellowship, worship and formation for our members is important to us. After completing this form, please give it to the parish, school or ministry where you plan to volunteer.

Full Name:
Email Address:
Best Phone Number:
Volunteer Site (Location)
Emergency contact – who would you like us to contact in the event of an emergency.
Name
Emergency contact Phone
Attestations
Has a civil lawsuit or employment complaint ever been filed against you for child abuse or sexual abuse? (Choose One) YES NO
If yes, explain:
Have you ever been charged with a crime related to child abuse or sexual abuse? (Choose One) YES NO If yes, explain:
Have you ever left an assignment or employment or been removed from an assignment or employment for reasons related to allegations of child abuse, physical abuse or sexual abuse?_
(Choose One) YES NO If yes, explain:
Please read each statement below. Write your initials to agree with each of the statements below.
I declare that all statements contained in this application are true. I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of the application.
I agree to observe all of the Catholic Diocese of Raleigh guidelines and policies for the program in which I am applying, including the Code of Conduct for Church Personnel for the Diocese of Raleigh.

I have read and understand the Code of	Conduct for Church Personnel for the Diocese of Raleigh.
takes all allegations of abuse seriously. I further	of Raleigh has a ZERO TOLERANCE FOR ABUSE and r understand that the Catholic Diocese of Raleigh rate all cases of alleged abuse. Abuse of minors or missal and possible criminal charges.
I understand that I can withdraw from the	ne application process at any time.
Please obtain the name of your Level C Adult S you will speak to if you have any items of conce	Supervisor while you are volunteering, this is the person to whom eern.
	nces that could attest to your character and leadership abilities. a reference. Please do not list any family members.
Reference One – Full Name	
Phone Number	
Reference Two – Full Name	
Email Address	
Phone Number	
Reference Three – Full Name	
Phone Number	
Applicant Signature	Date
Print Full Name	

Thank you for being a volunteer with children and/or teens. Please complete the following:

- 1. Complete this form and give it to the place where you will be a volunteer.
- 2. The site where you will be volunteering (school, parish or other ministry) will call your references.
- 3. As a Level B volunteer, you will be assigned to a Level C Supervisor at your ministry site.
- 4. This process may be completed in 4 to 7 business days.