



Adult Background Screening

www.JourneyWithChrist.org

In order to provide the safest environment for our youth at our events, all adult workers must complete all relevant sections of this form and return it completed and signed to the Journey with Christ Registrar address listed below at least a month before the weekend you intend to work or the date of your last screening, whichever is later. This form must be filled out every three (3) years. The results of this form are kept in strict confidence.

Instructions: All information must be included. Print legibly and use black or blue ink. Complete the form in its entirety pursuant to Child and Adult Abuse Information Act (RCW 43.43.8321 or 43.43.830, 9A.72.050)

| | | | | |
|--|------------|-------------------|------------|----|
| Last name | | First Name | | MI |
| Other/Previous names (include maiden/prior married name) | | Date of birth | Sex | |
| SSN (optional) | | Driver's License# | | |
| Home Address | | Church | | |
| City | State | Zip code | County | |
| Home Phone | Cell phone | | Work Phone | |

Criminal History Information (use additional sheet if needed)

| Criminal Conviction | Arrest Record | Conviction court | Conviction date | Arresting Police Agency | Level of Conviction Misdemeanor/Felony |
|---------------------|---------------|------------------|-----------------|-------------------------|---|
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Document in Lieu (For out of state/non Washington resident)

If you have been arrested for any sexual offense or crimes against minor or convicted of, pled guilty to, had a judicial finding of guilt for or had judicial finding restricting any contact with minor in any state other than Washington since your last background check or renewal/initial application, you shall provide to the registrar of the board :

- A criminal background check equivalent to WA state patrol Watch program
- Certified copy of police report or law enforcement agency, if applicable
- Certified copy of judgment entry from the court in which the conviction occurred or civil judgment/order restricting contact with minor.

Screening Questionnaire

| | |
|--|--|
| Yes No Questions <input type="checkbox"/> <input type="checkbox"/> Have you ever been convicted of any crime against children or other persons? | Yes No Questions <input type="checkbox"/> <input type="checkbox"/> Have you been convicted or released from incarceration for a conviction of the possession, use or sale of drugs within the last 7 years? |
| <input type="checkbox"/> <input type="checkbox"/> Have you ever been found in any dependency action to have sexually assaulted or exploited any minor or to have abused any minor? | <input type="checkbox"/> <input type="checkbox"/> Within the last 30 days have you abused alcohol, legal or illegal drugs? |
| <input type="checkbox"/> <input type="checkbox"/> Have you ever been found by a court proceeding to have sexually abused or exploited any minor or to have abused any minor? | <input type="checkbox"/> <input type="checkbox"/> Has your driver's license been suspended or revoked within the last 7 years? |

Screening Questionnaire (continued)

| | |
|--|---|
| Yes No Questions | Yes No Questions |
| <input type="checkbox"/> <input type="checkbox"/> Have you ever been convicted of crimes relation to financial exploitation where the victim was a vulnerable adult? | <input type="checkbox"/> <input type="checkbox"/> Other than the above matters, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of youth? |
| <input type="checkbox"/> <input type="checkbox"/> Have you ever been found by a court proceeding to have abused or financially exploited a vulnerable adult? | <input type="checkbox"/> <input type="checkbox"/> Have you ever been found by a business/professional licensing/disciplining board to have sexually, physically abused, or exploited any minor, developmentally disabled person, or vulnerable adult? |

Provide an explanation to all yes answers to the above questions below your signature at the bottom of sheet.

Covenant – by signing below, I agree to abide by these statements and the Journey with Christ Statement of Faith

- 1) "I will seek to honor Jesus Christ through my attitudes, words, and actions"
- 2) "I agree to live by the understanding that it is my responsibility to avoid sexual contact with anyone during the Journey with Christ weekend."

Notification of Right to Receive Background Check Results

If you would like to receive the results of the background check please contact the Registrar.

Applicant's Declaration in Lieu of Background Criminal Check & Authorization to Complete Background Check

I solemnly affirm, certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct and that I have not been convicted of, pled guilty to, had a judicial finding of guilt for, or had a judicial finding restricting access to minor in lieu of conviction for any other felony or misdemeanor other than the ones disclosed herein. I attest that all information provided is true and accurate to the best of my knowledge. I understand that a false statement on this application constitutes perjury and/or false swearing under RCW 9A.72.050 of the Revised Code of Washington State. Any false statement may also be grounds for denial, suspension, revocation or other disciplinary action by the board of Journey with Christ. I am solely responsible for this certification and I hereby give permission to the board of Journey with Christ to verify any of the above information at any time before the journey or after the journey I seek to serve in. I also give permission to the registrar of Journey with Christ to receive any information maintained by the Washington Access to Criminal History (WATCH) or equivalent process in any other state or country.

Date and Place

Applicant Signature

To be completed only by the Journey with Christ Registrar

I dully conducted a search of the database of
 Washington State Patrol's Washington Access to Criminal History (WATCH), or
 equivalent process in any other state or country, and I found
 Record Attached No Record Found

Date and Place

Signature

Date

Mail or email completed form at least two weeks prior to event to:

Journey with Christ, Kelly Matthews - Registrar
 c/o 11809 E. Alki, Spokane, WA 99206
 Phone: (509) 599-5236 --- email:
 JourneyRegistrar@gmail.com

Journey emergency contact number: 1 (877) 353-6709