## Statement of Applicant for Work with Children Youth and Vulnerable Persons



## Confidential

Applicant Name					
	Last	First	Middle		
This Section to be Completed by Ministry Unit Leader/Supervisor  Date					
Statement of Applicant Completed					
Acknowledgement of Standards of Practice for Working with Children, Youth and Vulnerable Persons					
Abuse Prevention Training Completed					
Criminal Record Check					
Acknowledgement of Abuse Pr					

It is essential that The Salvation Army provide a safe and secure environment for children, youth, and vulnerable persons who participate in its programs and who use its facilities. To help achieve this objective, this Statement will be completed by:

- (a) Candidates to serve as officers.
- (b) Officers and ministry unit leaders who may, by virtue of their responsibilities, be in proximity to children, youth or vulnerable persons in Salvation Army (TSA) program activities.
- (c) Applicants for employment and volunteer positions in TSA (including local Officers) which involve ongoing contact with children or youth or vulnerable persons.
- (d) Applicants for employment and volunteer positions, who may, by virtue of their job responsibilities, be in proximity to children, youth or vulnerable persons in TSA program activities.

Personal Info	rmation						
Name							
	Last			First		Middle	
Other Surnames							
Address							
	Number	Street/Ave		City	Prov	/Terr	Postal Code
Phone							
		Work		Mobile		Home	
Training For Work With Children and Youth or Vulnerable Persons							
of this education education/traini answer this que	n/training a ng. Those estion. If yo	on-the-job training. E and identify the institu in category (d), desc ou are in category (d) ons on the next page	ution whic cribed abo , please r	ch provided this ove, are not requ	uired to	Па	m in category (d)

Education						
School/Institution	Level Completed	Date of Completion	Certificate/Degree			
Relevant Job Training						
Job Title	e Describe relevant training completed					
Job Reference						
Contact	First L	ast Name	Job Title			
	Ema	il Address	Phone Number			
Job Reference						
Contact	First La	ast Name	Job Title			
		il Address	Phone Number			
<b>Prior Work with Childre</b>	n, Youth or Vul	nerable Persons				
	s. Provide the nam	e of each organization or reason for leaving e				
Organization	Start Date Month, dd, yyyy	End Date Month, dd, yyyy	Reason for leaving			
Job Reference		•				
Contact	First L	Last Name	Job Title			
	Ema	il Address	Phone Number			

		<b>.</b>			<b>I</b>		
	Reference						
Con	tact	First	Last	Name	Job Title		
		Email Address Phone				Phone Number	
Crir	ninal Record						
Have you ever been convicted of an offense which involved the abuse or endangerment of a child or youth or vulnerable adult? (You may answer 'No' if you were convicted of an offense for which pardon was granted under the Criminal Records Act – Canada).  Yes No						No	
If ye	s, provide details	of all conviction	s below.				
	<b>horization</b> I hereby authorize	e The Salvation <i>i</i>	Army to conduc	ct whatever sea	rches it deems n	ecessary, inclu	ding a
		e The Salvation Army to conduct whatever searches it deems necessary, including a earch, to confirm that the information set out above is accurate and complete.					
		ereby authorize The Salvation Army to conduct a search of all Abuse Registries in Canada to confirm t I am not listed as a child abuser.					
		agree that, immediately upon request, I shall provide The Salvation Army with whatever consents orizations it requires to conduct the searches that are contemplated in paragraphs 1 and 2 above.					
	I hereby agree that, immediately upon request, I shall provide The Salvation Army with whatever consents and authorizations it requires to conduct the searches that are contemplated in paragraphs 1 and 2 above.						
Sig	nature						
App Nan	olicant ne:						
Please Print Fil		First		Initial		Last	
Applicant							
Signature:						Month d	d, yyyy