

# Pioneer Country Chrysalis

## Safe Sanctuary Screening Kit

### Instructions:

1. Applicant read and understand page 2.
2. Applicant fill out pages 3, 4, & 5, and return to Pioneer Country Chrysalis via the address on the forms.
3. Have references fill out pages 6 & 7, and have them mail them to Pioneer Country Chrysalis address on the evaluation forms.

NOTE: If time constraints prevent mailing, then contact the Lay Director, Spiritual Director, or Community Lay Director for instructions. All forms must be hand signed (no digital signatures)

# Safe Sanctuary Screening Process

For workers with children and/or youth in all settings of ministry related to Pioneer Country Chrysalis

1. All adults who have responsibility for the safety and oversight of children and/or youth at conference or district events or in the local church (according to the local church policies and procedures) shall submit to a thorough screening process of Pioneer Country Chrysalis every four years. A copy of a current background check, provided by your local church, will be accepted.
2. Minors working as assistants to responsible adults shall submit to the same screening with the exception of the criminal background check.
3. The Pioneer Country Chrysalis Safe Sanctuary Screening Process involves completion of a form that includes personal contact and background information, an applicant disclosure statement, a disclosure notice, and two references. From this information appropriate background checks (criminal background check, social trace, driving records, etc...) are run through a commercial service provider.
4. Personal evaluations of character and work habits are gleaned from reference letters and subsequent evaluation. The applicant is responsible for distributing Reference Forms (2 have been included).
5. Before taking responsibility with children and/or youth, applications will receive orientation and training for the duties they are asked to undertake. Adequate supervision, support and feedback shall also be provided.
6. A Pioneer Country Chrysalis Board Member/Steering Committee Member/Designated person shall be responsible for verifying that every volunteer or paid staff person working with children and/or youth has completed the screening process prior to any unsupervised, direct contact with such individuals.
7. A Pioneer Country Chrysalis Board Member/Steering Committee Member shall have the final say on who can or cannot serve.
8. Confidentiality in this process is critical. For Pioneer Country Chrysalis applicants and references should return forms directly and promptly to address provided below.
9. Please do not turn any forms into the Weekend Lay Director. Instead, mail to:

Pioneer Country Chrysalis  
P.O. Box 270342  
Oklahoma City, OK 73137-0342

# Safe Sanctuary Screening Form

For workers with children and/or youth at PIONEER COUNTRY CHRYSALIS

Please type or print clearly ALL pages! Return completed form to:

Pioneer Country Chrysalis  
P.O. Box 270342  
Oklahoma City, OK 73137-0342  
Gender: M or F (circle one)

Check here if you are under 18 :

Full legal name:

\_\_\_\_\_  
LAST FIRST MIDDLE (MAIDEN)

Other names you have used (legal or nicknames) \_\_\_\_\_

Current home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_ (cell) \_\_\_\_\_

Other addresses used in past three years:

\_\_\_\_\_

Date of birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Driver's license number \_\_\_\_\_ State \_\_\_\_\_

Church affiliation \_\_\_\_\_ City \_\_\_\_\_

# Safe Sanctuary Screening Form

Answer these questions and attach another page with an explanation of any YES answers marked with an asterisk (YES\*).

1. Have you ever been charged, convicted of, or pled guilty to a crime (misdemeanor or felony) against children or other persons (including but not limited to drug-related charges, child abuse, other crimes of violence, theft or motor vehicle violations YES\* NO

2. Has your driver's license ever been revoked or suspended? YES\* NO

3. Has a board that licenses businesses or professions ever licensed you? YES NO

If "yes", what board or agency?

\_\_\_\_\_

If "yes", has this license ever been revoked or suspended? YES\* NO

4. Have you ever habitually abused alcohol or controlled substances? YES\* NO

Signature \_\_\_\_\_ Date \_\_\_\_\_

Provide names and contact information for TWO references who have first-hand awareness of your work and can attest to your character (teachers, employers, classmates, pastors, etc.). YOU are responsible for distributing

Reference Forms to each person:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

## Code of Conduct

In all meetings or other events under the sponsorship/guidance of Pioneer Country Chrysalis, I am a representative of the Christian Community and I am responsible for my actions. I understand and agree to follow the following guidelines:

1. I will not bring or use firearms, explosives, illegal drugs, alcoholic beverages or tobacco products because all are prohibited.
2. My conduct will be in keeping with the highest Christian regard for all people.
3. I will be expected to participate in all group activities and small group meetings.
4. I understand that sleeping at night is good for my health and alertness so I will be in my room in my bed as directed.
5. I will dress appropriately for my Christian witness.
6. I am responsible to immediately report any suspected unlawful activity to the Lay Director or Spiritual Director (Conference Room) or Community Lay Director or Spiritual Director (Outside of Conference Room).
7. I am responsible to report any person whose Safe Sanctuary status may be uncertain to the Lay Director or Spiritual Director (Conference Room) or Community Lay Director or Spiritual Director (Outside of Conference Room).

I have read and understood the Code of Conduct listed above, and I agree to abide by the Code of Conduct at all times during all Chrysalis events:

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Signature

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Date

Printed Name:

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OSBI or Pioneer Country Chrysalis approved background checks must be completed and mailed by everyone, 18 years of age and older. A current background check, on file with your local church, will be accepted. Please send a copy to:

Pioneer Country Chrysalis  
P.O. Box 270342  
Oklahoma City, OK 73137-0342

Please type or print clearly!

# Safe Sanctuary Reference Form

## PIONEER COUNTRY CHRYSALIS

(Applicant is to distribute this form to persons identified as "References" in the Screening Form.)

Applicant's Name: \_\_\_\_\_ City \_\_\_\_\_

The above named individual has applied to work with children and/or youth in a Christian setting.

Please honestly complete this form as it relates to this person's character and qualifications as you know them. To maintain confidentiality return the completed form to:

Pioneer Country Chrysalis  
P.O. Box 270342  
Oklahoma City, OK 73137-0342

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

Please rate this individual in the following areas: (\*if you answer "Do Not Know", please comment or explain in the "Do Not Know" column. You may use the back of this page if you need more space.)

	Excellent	Good	Average	Poor	Unknown*
Personal Habits					
Moral Character					
Compassion					
Responsibility					
Emotional Stability					
Christian Maturity					
Openness to Critique					
Teamwork					
Health					

Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE PRINT: Evaluator's Name \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**YOUR IMMEDIATE RESPONSE IS GREATLY APPRECIATED!**

Please type or print clearly!

## Safe Sanctuary Reference Form

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Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE PRINT: Evaluator's Name \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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