

## DISCLOSURE FORM FOR WORKERS WITH CHILDREN AND YOUTH

The East Ohio Conference of the United Methodist Church  
Camp and Retreat Ministries

The East Ohio Conference cares about all persons, especially about children and youth who are in its care for special programs, and works to insure their safety. Our commitment is to do everything reasonably possible to see that no physical, sexual, emotional or psychological harm comes to children while attending resident, trip, travel, or day programs sponsored by Camp and Retreat Ministries. Any person, volunteer or paid, who will potentially be in a position to provide supervision, custodial care, or leadership with children, youth, vulnerable adults, or developmentally disabled persons is asked to complete this form, so that we will best be able to care for the persons we seek to serve.

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Please answer all of the following questions. Include an explanation for any yes answer.

1. Have you ever been convicted of any crime against children or other persons?  
YES NO
2. Have you ever been found in any dependency action to have sexually assaulted or exploited any minor or to have physically abused any minor?  
YES NO
3. Have you ever been found by any court in a domestic relations proceeding to have sexually assaulted or exploited any minor, or to have physically abused any minor?  
YES NO
4. Have you been convicted of the possession, use, or sale of illegal drugs or other controlled substances within the last seven (7) years?  
YES NO
5. Within the past 30 days, have you abused alcohol, legal or illegal drugs?  
YES NO
6. Have you ever been convicted of crimes relating to financial exploitation where the victim was a vulnerable adult?  
YES NO
7. Have you ever been found by a court in a protection proceeding to have abused or financially exploited a vulnerable adult?  
YES NO

8. A) Have you ever been licensed by a Board that licenses businesses or professions? If yes, please answer parts b) and c) as well. Please note: for clergy this includes approval by the Board of Ordained Ministry, District Committee on Ordained Ministry, or any other body which offers approval for pastoral work.

YES NO

B) Have you ever been found by a licensing board, any of its component parts, or any other disciplinary board to have sexually or physically abused or exploited any minor or developmentally disabled adult?

YES NO

C) Have you ever been found by that licensing board, any of its component parts, or any other disciplinary board to have financially exploited any vulnerable adult?

YES NO

9. Other than the above is there any fact or circumstance involving you or your background that would call into question your being entrusted with the care, supervision, and guidance of young persons, vulnerable adults, or developmentally disabled persons?

YES NO

By signing this form, I agree to live by the understanding that, as a person in authority, it is my responsibility to avoid all sexual contact with children, youth, vulnerable adults, and developmentally disabled persons in my care, even if it seems, or is true, that the contact is initiated by the child, youth, vulnerable adult, or developmentally disabled person.

I agree to find alternative ways to discipline, and under no circumstances will I use spanking, neck or choke holds, ear or hair pulling, or any other means of corporal punishment as a means of correction or punishment.

I certify that the information I have provided is true and correct. If it is found that the answers given are in any way untrue, I understand that this may be cause for my dismissal from paid or volunteer service.

Name (Printed) \_\_\_\_\_

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