

2018 VBS Volunteer Information Packet

June 18-June 22

St. Mary VBS works only with the help of our wonderful volunteers. In order to make this program successful,
we need you!

We are looking for adult and youth volunteers to help during VBS week, Monday June 18th – Friday June 22nd from 9:00-11:45 a.m. In addition, volunteers are needed to transform the school to go along with the theme. The theme for this year is “Splash Canyon: God’s Promise on Life’s Wild Ride” In order to volunteer, youth must be entering 6th grade in the fall. High school and college youth are especially needed as counselors. On the volunteer form, carefully note your availability and your area of interest. We will try our best to place you in your first choice. You will be contacted by our volunteer coordinator with more information regarding your volunteer assignment.

Training:

- ✓ All volunteers aged 18 and older must have completed VIRTUS training (Please see the following page)
- ✓ All volunteers aged 18 and older must have completed a background check

Volunteer Meeting:

- ✓ All volunteers must attend a Volunteer Information Meeting. Information about the meeting will be emailed to you.
- ✓ At the meeting you will learn more about your volunteer location and meet the committee members.
- ✓ T-shirts will also be handed out and any missing forms can be handed in.

Childcare:

- ✓ We will provide childcare for the children of volunteers on the days you are helping at VBS. We have a fully staffed childcare room for children under three years, and a mini VBS preschool program for children who are three years old.

Service Hours:

- ✓ Volunteering for VBS is a great way to earn service hours for the coming school year!

Contact:

- ✓ If you have any questions feel free to email stmarysvbs16@gmail.com or contact Megan Mandro (773) 612-7018

Thank you,
Breanna Piland and Megan Mandro

Please check off all of the forms you have completed and are handing in. If you completed VIRTUS please include the date of your training.

Everyone needs to complete:

_____ Volunteer form- Please complete this to let us know what days you can volunteer and what areas you are interested in.

_____ Medical form- Must be completed every year **by every volunteer.**

18 and over need to complete:

_____ CANTS- Must be completed every year **by volunteers 18 and over. Please turn in with your volunteer paperwork.**

_____ Code of conduct-Must be completed every year **by volunteers 18 and over**

Training:

_____ VIRTUS Training- This is offered through the Archdiocese of Chicago. Check their website for available dates and locations. This must be completed in order to volunteer. **This is a one time class for all volunteers 18 and over.** When you complete the class please turn in your certificate to the office. If you have completed it previously please list the date and location you completed the class.

http://legacy.archchicago.org/departments/safe_environment/training.shtm

_____ Background check- This is a **one time form** for all volunteers 18 and over. If you completed it last year you do not need to do it this year. The form can be found and completed using the following link. The access code is **protection** https://www.eappsdb.com/Login.asp?ORGZ_KEY=18

Volunteer Information/Medical Form 2018
St. Mary of the Annunciation Vacation Bible School

Name: _____ Email Address: _____

Address: _____ Phone Number: _____

***PLEASE FILL OUT THIS SECTION ONLY IF YOU ARE A YOUTH VOLUNTEER**

I, the parents of (youth volunteer name) _____, authorize the St. Mary of the Annunciation Vacation Bible School program to seek immediate medical attention if this child suffers an injury while volunteering at Vacation Bible School. It is my (our) understanding that the following procedures will be followed in the event of an injury:

- 911 will be called and paramedics will be dispatched to assess the injury of the person
- The parent or guardian listed below will be contacted immediately.
- If the paramedics deem it necessary to transport the youth to a hospital facility, it will be done immediately.

PARENT/GUARDIAN SIGNATURE (for youth volunteers only) :

***PLEASE FILL OUT THIS SECTION ONLY IF YOU ARE AN ADULT VOLUNTEER**

I, _____ authorize the St. Mary of the Annunciation Vacation Bible School Program to seek immediate medical attention if I suffer an injury while volunteering at Bible School. It is my understanding that the following procedures will be followed in the event of an injury:

- 911 will be called and paramedics will be dispatched to assess the injury
- The person listed as your emergency contact will be contacted immediately
- If the paramedics deem it necessary to transport you to a hospital facility, it will be done so immediately.

***ALL VOLUNTEERS PLEASE FILL OUT THIS SECTION**

Emergency Contact (other than yourself): _____ Phone: _____

Alternate Emergency Contact: _____ Phone: _____

Do you have any medical or special needs, including medications currently being used?

No _____ Yes _____

If yes, please explain: _____

Please list any allergies. Include medications, foods, etc. _____

In addition, I, the undersigned, waive responsibility of St. Mary of the Annunciation Church and all volunteers of the Vacation Bible School program if accident or injury occurs to me/my child while volunteering for the St. Mary of the Annunciation Vacation Bible School program.

Adult Volunteer/Parent or Legal Guardian of Youth Volunteer

Date

AUTHORIZATION FOR BACKGROUND CHECK

Child Abuse and Neglect Tracking System (CANTS)

For Programs NOT Licensed by DCFS NOTE: Do not use this form if you are an applicant for licensure or an employee/volunteer of a licensed child care facility.

Please contact your licensing representative.

Name:

Last First Middle

Date of Birth: _____ **Gender (circle):** Male Female **Race:** _____

Current Address: _____

Street/Apt.

City: _____ **State:** _____ **Zip code:** _____

Parish/School/Agency: _____

Your Position (Circle One): Priest Deacon Religious Order Lay Employee Volunteer

List all addresses at which you have resided in the past five years: _____

List maiden name and/or all other names by which you have been known: (last, first, middle)

I hereby authorize the Illinois Department of Children and Family Services to conduct a search of the Child Abuse and Neglect Tracking system (CANTS) to determine whether I have been a perpetrator of an indicated incident of child abuse and/or neglect or involved in a pending investigation. I further consent to the release of this information to the agency listed below.

Signature and Date

**Archdiocese of Chicago (Agency Name) Jan Slattery (Contact Person) 835 N Rush St. (Address)
Chicago, IL 60611 (City/State/Zip)**

**Mail this request to: Department of Children and Family Services 406 E. Monroe – Station #30
Springfield, IL 62701**

DCFS

Code of Conduct for Church Personnel

As someone who ministers to young people and/or vulnerable adults, I will maintain a professional role and be mindful of the trust and power I possess as a minister to young people and vulnerable adults.

To achieve this, I WILL NOT:

- Touch a minor or vulnerable adult in a sexual way or other inappropriate manner.
- Be alone with a minor or vulnerable adult in a residence, rectory, sleeping facility, or any other closed room.
- Share a bed with a minor or vulnerable adult.
- Take an overnight trip alone with a minor or vulnerable adult.
- Acquire, possess or distribute pornographic images of minors under the age of 18.
- Introduce sexually explicit or pornographic topics, vocabulary, music, recordings, films, games, websites, computer software or entertainment to a minor or vulnerable adult.
- Provide alcohol, cigarettes or controlled substances to a minor or vulnerable adult.
- Use, possess, or be under the influence of illegal drugs.
- Use alcohol when engaged in ministering to a minor or vulnerable adult.
- Engage in physical discipline for behavior management of minors or vulnerable adults.
- Humiliate, ridicule, bully, or degrade another person.

Measures to Aid Observance of the Code of Conduct

To help me keep the promises in the Code, I WILL:

- Report any suspected child abuse or abuse of a vulnerable adult to the proper authorities.
- Avoid physical contact when alone with a minor or vulnerable adult. Physical contact with minors or vulnerable adults can be misconstrued, especially in private settings.
- Avoid overnight stays with a minor or vulnerable adult unless there is another adult present in a supervisory role.
- Avoid providing overnight accommodations for minors or vulnerable adults in private residences or rectories.
- Avoid driving alone in a vehicle with a minor or vulnerable adult.
- Have more than 1 child and at least 2 adults present when using one's own home for youth work.
- Assume the full burden for setting and maintaining clear, appropriate physical and emotional boundaries in all ministerial relationships.
- Refrain from giving expensive or inappropriate gifts to a minor or vulnerable adult.
- Avoid meeting privately with minors or vulnerable adults in rooms, offices, or similar areas where there is no window or where the door cannot remain open. If one-on-one pastoral care of a minor or vulnerable adult is needed (e.g. Sacrament of Reconciliation) avoid

meeting in isolated locations.

- Exercise caution in communicating through e-mails or the internet. Only share work/ministry related e-mail addresses with minors and vulnerable adults. Do not participate in chat rooms with minors or vulnerable adults.
- Ensure that all activities (extra-curricular, catechetical, youth ministry, scouting, athletics etc.) for which you are responsible have been approved in advance by the appropriate administrator.
- Have an adequate number of adults present at events. A minimum of 2 adults in supervisory roles must always be present during activities for minors and vulnerable adults.
- Release young people only to parents or guardians, unless the parent or guardian has provided permission allowing release to another adult.
- Avoid taking minors and vulnerable adults away from the parish, school, or agency for field trips, etc. without another adult present in a supervisory role. Obtain written parental/guardian permission before such activities. Permission slips should include the type, locations, dates, and times of the activity and emergency contact numbers.

Practical Suggestions

These are some practical suggestions for identifying permissible and impermissible conduct.

Conduct that May Be Permissible

Appropriate affection between Church personnel and minors and vulnerable adults constitutes a positive part of Church life and ministry. Nonetheless, any touching can be misunderstood and must be considered with great discretion. Depending on the circumstances, the following forms of affection are customarily (but not always) regarded as appropriate.

- Verbal praise
- Handshakes
- “High-fives”
- Pats on the shoulder or back
- Hugs (brief)
- Holding hands while walking with small children
- Sitting beside small children
- Kneeling or bending down for hugs from small children
- Holding hands during prayer
- Pats on the head when culturally appropriate

Conduct that is Not Permissible Revised Feb. 2015

Some forms of physical affection have been used by adults to initiate inappropriate contact with minors. In order to maintain the safest possible environment for minors and vulnerable adults, the following are examples of affection that are NOT TO BE USED:

- Inappropriate or lengthy embraces
- Kisses on the mouth
- Holding minors over four years old on the lap
- Touching buttocks, chest, legs or genital areas
- Showing affection in isolated areas such as bedrooms, closets, staff-only areas or other private rooms
- Wrestling or tickling minors or vulnerable adults
- Piggyback rides
- Any type of massage given by minor to adult, or by adult to minor.
- Any form of unwanted affection
- Compliments that relate to physique or body development

Code of Conduct Acknowledgement Form Employees and Volunteers

Parish/School/Agency _____

Date _____

I have received a copy of the Code of Conduct for Church Personnel. I have read and understand this Code of Conduct, and I agree to abide by it. I have also read and understand the "Measures to Aid Observance of the Code of Conduct" and the "Practical Suggestions" and will employ them to help me observe the code of conduct. A violation of this code can result in disciplinary action, up to and including termination and/or removal from ministry.

Signature

Print Name

Position

The signed Code of Conduct Acknowledgement Form shall be kept in employee personnel files at the agency/parish/school or in a general volunteer file at the agency/parish/school.

Please return this completed form to the site where you are an employee or volunteer.