Bel Air UMC Safe Sanctuary QUESTIONNAIRE

(Please check the appropriate line. If more space is needed, please use an additional sheet of paper.)

1.	Have you ever been accused, in a written and signed statement, of sexual misconduct with a child or youth? ☐ Yes ☐ No
2.	Have you ever been accused, in a written and signed statement, of sexual misconduct with an adult? ☐ Yes ☐ No
3.	Have you ever been dismissed from any position, volunteer or salaried, because of accusations of sexual misconduct on your part? ☐ Yes ☐ No
4.	Have you ever resigned from any position, volunteer or salaried, because of an accusation of sexual misconduct on your part, or to avoid being dismissed because of an accusation of sexual misconduct on your part? ☐ Yes ☐ No
details	response to any of the foregoing questions (1 through 4) is "yes", please provide on a separate sheet of paper als regarding each accusation of sexual misconduct that has been made with respect to you, including a description alleged conduct, and the name of your employer at the time of the alleged misconduct.
5.	Have accusations of sexual misconduct on your part ever resulted in civil or criminal court proceedings at any level (e.g., indictment, arrest, trial, etc.)? Yes No
	please provide the complete details of those proceedings (including dates, circumstances, the jurisdiction where coceedings occurred, the nature of the accusations, and the result of the proceedings) on a separate sheet of
6.	Have accusations of sexual misconduct against you resulted in civil or criminal court proceedings on more than one occasion? Yes No
7.	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 supervision, guidance, and care of young people? Yes No
	QUESTIONNAIRE RESPONSE FORM
(Tc	be signed by all laypersons and un-appointed clergy who work with children or youth within the local church or a Conference agency. If under 18, a parent or guardian must also sign.)
under	y that the answers I have provided on this Questionnaire are true and accurate to the best of my ability. I stand that false answers, as well as the failure to sign this Response Form, will result in my being denied the on for which I am being considered.
Signa	ture:Date:
Pleas	e Print Your Name:
Volun	teers' Date of Birth Cell Phone:
Paren	t/Guardian:Date:
Pleas	e Print Your Name:
Addre	ss:City:Zip Code:
Email:	