
WEAVERTOWN MENNONITE CHURCH

APPLICATION FOR APPROVAL TO SUPERVISE MINORS

APPLICANT INFORMATION:

Full Legal Name:	
Birthdate:	Phone Number:
Mailing Address:	Email Address:

PERMISSION TO OBTAIN CLEARANCES

- ✓ I authorize the Weavertown Mennonite Church Child Safety Team to perform criminal and child abuse history checks on myself and to maintain documentation of the same.
- ✓ I affirm I will not be paid for my service to Weavertown Mennonite Church.
- ✓ I am at least 18 years old.

Signature: _____ **Date:** _____

CLEARANCES

Please see application instructions document for detail on completing the background checks (weavertown.org/childsafety)

1. Complete PA State Police (PSP) Criminal background check & record the **control #** _____ & **Date:** _____
2. Complete PA Child Abuse History Clearance. Date on Clearance: _____
3. Obtain FBI Criminal background check **or** sign affidavit below, whichever applies (**check** applicable box):
 - I affirm I have lived in the state of Pennsylvania continuously for the last 10 years AND I have reviewed §6344 (refer to instructions document) and am not disqualified from service based upon any convictions of similar offenses in any other locale. Signature: _____ Date: _____
 - OR,**
 - Complete an FBI fingerprint and background check (\$24.50 fee) **if** you have **not** lived continuously in PA for the last 10 years.

SUBMISSION

Submit completed application and clearances to Mark Nisly. Application is preferable to be scanned and emailed to weavertowncst@outlook.com but may also be submitted physically. See instruction document for details on submitting clearances.

Following verification of all required clearances by the CST, the CST/ministry team will evaluate your application and notify you of approval or disqualification. The list of approved members will be publicly available to any member of the Weavertown Mennonite Church, but clearances are strictly confidential.