

CHILDCARE WORKER QUESTIONNAIRE

Thank you for your willingness to minister to our personnel by volunteering to care for their children during their upcoming meeting. We deeply appreciate your commitment to the cause of Christ and to quality care for those who will be entrusted to you while you are with us. A major concern among all Christian agencies and organizations that work with children, including ours, is that of child sexual abuse. Our organization has given us the responsibility of insuring, to the best of our ability, that policies are set and enforced which will protect our children from the risk of being abused by those whom we trust. For that reason, may we ask you to complete the following questionnaire? Please fill in or circle the appropriate answer.

Name _____ Age _____

Church/Organization _____

1. Length of membership in your home church or with your present organization?

_____ 1-3 years _____ 3-5 years _____ 5-10 years _____ more than 10 years

2. Do you regularly work with children? (circle one) YES NO

3. Ages of children with whom you regularly work: (circle one)

NURSERY PRE-SCHOOL ELEMENTARY MIDDLE SCHOOL HIGH SCHOOL

4. Are you aware of your having been sexually abused as a child? (circle one) YES NO

5. If the answer is yes, have you received counseling to deal with the emotional, psychological, and spiritual scars that often result from such an experience? (circle one) YES NO

6. Have you ever been involved in touching children in an inappropriately sexual way, child molestation, indecency with a minor, or child sexual assault? (circle one) YES NO

7. Have you ever been accused of, arrested for, indicted for, and/or convicted of child molestation (indecency with a minor, child sexual assault, etc.)? (circle one) YES NO

I have read the Childcare Protection Policies and agreed to abide by the guidelines stated therein.

Signature _____ Date _____

This individual is well known to me, and I can, without reservation, endorse him/her to you as a volunteer childcare worker.

Pastor or Supervisor _____ Date _____

DO NOT WRITE BELOW THIS BOX

Event _____ Age Group _____

Location _____ Dates _____