



# CHILD PROTECTION POLICY

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## GENERAL PURPOSE STATEMENT

Horizon Christian Fellowship seeks to provide a safe and secure environment for the children who participate in our programs and activities. By implementing the below practices, our goal is to protect the children of Horizon Christian Fellowship from incidents of misconduct or inappropriate behavior while also protecting our church, staff and volunteers (workers) from false accusations.

## DEFINITIONS

For purposes of this policy, the terms “child” or “children” include all persons under the age of eighteen (18) years. The term “worker” includes both paid and volunteer persons who work with children.

## SELECTION OF WORKERS

All persons who desire to work with the children participating in our programs and activities will be screened. This screening includes the following:

### SIX MONTH RULE

No applicant will be considered for any position, other than administrative support roles, involving direct contact with children until she/he has been involved with Horizon Christian Fellowship for a minimum of six (6) months. This time of interaction between our leadership and the applicant allows for better evaluation and suitability of the applicant for working with children.

### WRITTEN APPLICATION

All persons seeking to work with children must complete and sign a written application in a form to be supplied by us. The application will request basic information from the applicant and will inquire into previous experience with children, previous church affiliation, reference and employment information, as well as disclosure of any previous criminal convictions. The application form will be maintained in confidence on file at the Horizon Christian Fellowship.

### PERSONAL INTERVIEW

Upon completion of the application, a face-to-face interview may be scheduled with the applicant to discuss his/her suitability for the position.

### REFERENCE CHECKS

Before an applicant is permitted to work with children, at least two of the applicants’ references will be checked. These references should be of an institutional nature as opposed to personal or family references, preferably from organizations where the applicant has worked with children in the past. Documentation of the reference checks will be maintained in confidence on file at Horizon Christian Fellowship.

### CRIMINAL BACKGROUND CHECK

A national criminal background check is required for all employees (regardless of position) and for all volunteers serving directly with children.

Before a background check is run, prospective workers will be asked to sign an authorization form allowing the church/synagogue/meeting to run the check. If an individual declines to sign the authorization form, she/he will be unable to work with children.

What constitutes a disqualifying offense that will keep an individual from working with children will be determined by the Pastoral Leadership of Horizon Christian Fellowship on a case-by-case basis in light of all the surrounding circumstances.

Generally, convictions for an offense involving children and/or for offenses involving violence, dishonesty, illegal substances, indecency and any conduct contrary to our mission will preclude someone from being permitted to work with children. Failure to disclose a criminal conviction on the application form will also be a disqualifying event.

The background check authorization form and results will be maintained in confidence on file at the church.

## **TWO ADULT RULE**

It is our goal that a minimum of two unrelated adult workers will be in attendance at all times when children are being supervised during our programs and activities. Some youth classes may have only one adult teacher in attendance during the class session; in these instances, doors to the classroom should remain open and there should be no fewer than two students with the adult teacher. We do not allow minors to be alone with one adult on our premises or in any sponsored activity unless in a counseling situation and only with the approval of the senior pastor.

## **RESPONDING TO ALLEGATIONS OF CHILD ABUSE**

For purposes of this policy, "child abuse" is any action (or lack of action) that endangers or harms a child's physical, psychological or emotional health and development. Child abuse occurs in different ways and includes the following:

**PHYSICAL ABUSE** - any physical injury to a child that is not accidental, such as beating, shaking, burns, and biting.

**EMOTIONAL ABUSE** - emotional injury when the child is not nurtured or provided with love and security, such as an environment of constant criticism, belittling and persistent teasing.

**SEXUAL ABUSE** - any sexual activity between a child and an adult or between a child and another child at least four years older than the victim, including activities such as fondling, exhibitionism, intercourse, incest, and pornography.

**NEGLECT** - depriving a child of his or her essential needs, such as adequate food, water, shelter, and medical care.

Childcare workers may have the opportunity to become aware of abuse or neglect of the children under our care. In the event that an individual involved in the care of children at this church becomes aware of suspected abuse or neglect of a child under his/her care, this should be reported immediately to the senior or associate pastor(s) for further action including reporting to authorities as may be mandated by state law.

In the event that an incident of abuse or neglect is alleged to have occurred at Horizon Christian Fellowship or during our sponsored programs or activities, the following procedure shall be followed:

1. The parent or guardian of the child will be notified.
2. The worker alleged to be the perpetrator of the abuse or misconduct will immediately be placed on leave from working with children pending an investigation and instructed to remain away from the premises during the investigation.
3. Civil authorities will be notified, and the church will comply with the state's requirements regarding mandatory reporting of abuse as the law then exists. Horizon Christian Fellowship and the church's leadership will fully cooperate with the investigation of the incident by civil authorities.
4. Our insurance company will be notified, and we will complete an incident report. Any documents received relating to the incident and/or allegations will immediately be forwarded to the insurance company.
5. Our senior pastor or his designee will be our spokesperson to the media concerning incidents of abuse or neglect, unless he or she is alleged to be involved. We will seek the advice of legal counsel before responding to media inquiries or releasing information to the congregation. All other representatives of the church should refrain from speaking to the media.
6. A pastoral visit will be arranged for those who desire it.
7. Any person who is not found innocent of the alleged abuse or misconduct will be removed from their position working with children or youth.

## **OPEN DOOR POLICY**

Classroom doors should remain open unless there is a window in the door or a side window beside it. Doors should never be locked while persons are inside the room.

## **RIDES**

Adult drivers must have approved children/youth ministry applications on file with Horizon Christian Fellowship in addition to appropriate driver's license application with the church before taking children in their vehicle. Proof of automobile insurance is required and must be kept up to date and on file at the church. No one should be alone with a child in their vehicle that is not related to them under any circumstances.

## **PHYSICAL CONTACT**

Adult workers must be conscious and fully aware of the physical contact they have with children. Hugs must be short, appropriate and from the side to eliminate the possibility of contact with certain body parts. High fives, pats on the shoulder/upper back and handshakes are appropriate ways to encourage children. Male workers should never have children sit on their lap. If necessary, a child can sit on the knee of a male worker, but only if the child is under the age of four and the contact is necessary and appropriate in the course of the classroom environment. Children age five and up should never sit on the laps of a worker under any circumstances.

Workers should always ask the question—

“Would the parents and Christ approve of the contact I am having with the child?” If not, don't do it.

## **TEENAGE WORKERS**

We recognize that there may be times when it is necessary or desirable for babysitters (paid or volunteer) who are themselves under age 18 to assist in caring for children during programs or activities. The following guidelines apply to teenage workers:

- Must be at least age 12; must be 14 if babysitting outside of services at the church.
- Must be screened as specified above.
- Must be under the supervision of an adult.

## **CHECK-IN/CHECK-OUT PROCEDURE**

For children grade 5 and under, a security check-in/check-out procedure will be followed. Parents must check children in to the Children's Ministry by signing them in. Parents also must check their child out of the Children's Ministry. The signatures should match or appropriate identification will be secured by the worker. In the event that a parent or guardian is unable to present identification, the Children's Ministry Area Leader will be contacted, who will be responsible for releasing the child to the care of a parent or guardian after discussing the surrounding circumstances with the parent or guardian.

## **SICK CHILD POLICY**

It is our desire to provide a healthy and safe environment for all of the children at Horizon Christian Fellowship. Parents are encouraged to be considerate of other children when deciding whether to place a child under our care. In general, children with the following symptoms should NOT be dropped off:

- Fever, diarrhea, or vomiting within the last 48 hours
- Green or yellow runny nose
- Eye or skin infections
- Other symptoms of communicable or infectious disease

Children who are observed by our workers to be ill will be separated from other children and the parent or guardian will be contacted to request that the child be picked up for the day.

## **MEDICATIONS POLICY**

It is the policy of Horizon Christian Fellowship not to administer either prescription or non-prescription medications to the children under our care. Medications should be administered by a parent at home. Parents are reminded of our sick child policy.

Exceptions to the medications policy may be granted to parents of children with potentially life-threatening conditions (such as asthma or severe allergic reactions). Parents of such children should address their situation with the Children's Ministry Area Leader to develop a plan of action.

## **DISCIPLINE POLICY**

It is the policy of Horizon Christian Fellowship not to administer corporal punishment, even if parents have suggested or given permission for it. There should be no spanking, grabbing, hitting, or other physical discipline of children. No yelling, sarcasm, taunting, verbal condemnation or raised voices will be utilized as a method of disciplining children. Words will be used to build children up, not to tear children down. Children should not be removed from the classroom without consulting Children's Ministry Area Leader, the Service Coordinator or a member of our pastoral staff. Children who are removed must not be isolated. Instead, they should be immediately taken to their parents.

Workers should consult with the Children's Ministry Area Leader or a member of the pastoral staff if assistance is needed with disciplinary issues.

## **RESTROOM GUIDELINES**

Children **seven years of age and younger** should be escorted in multiples to the main bathroom. They should always go in a pair or a group, never taking a child to the bathroom alone. The workers/helpers should check the bathroom first to make sure that it is empty, and then allow the children inside. The workers should then remain outside the bathroom door and escort the children back to the classroom. If a child is taking longer than seems necessary, the worker should open the bathroom door and call the child's name. If a child requires assistance, the workers should prop open the bathroom door as they assist the child.

For children ages **eight through eleven**, children can be permitted to go to the restroom with a partner or with a classroom helper.

For the protection of all, workers should never be alone with a child in a bathroom with the door closed and never be in a closed bathroom stall with a child. Parents are strongly encouraged to have their children visit the bathroom prior to each class.

## **ACCIDENTAL INJURIES TO CHILDREN**

In the event that a child or youth is injured while under our care, the following steps should be followed:

1. For minor injuries, scrapes, and bruises, workers will provide First Aid (Band-Aids, etc.) as appropriate and will notify the child's parent or guardian of the injury at the time the child is picked up from our care.
2. For injuries requiring medical treatment beyond simple First Aid, the parent and/or guardian will immediately be summoned in addition to the worker's supervisor. If warranted by circumstances, an ambulance will be called.
3. Once the child has received appropriate medical attention, an incident report will be completed in the case of injuries requiring treatment by a medical professional.

## **TRAINING**

Horizon Christian Fellowship will provide training on this child protection policy to all new childcare workers and will strive to provide opportunities for additional training classes or events on an annual basis. All workers are required to attend these training events.



**H O R I Z O N**  
CHRISTIAN FELLOWSHIP

# VOLUNTEER APPLICATION

PLEASE PRINT: LAST, FIRST NAME



# VOLUNTEER APPLICATION

This application is to be completed by all applicants for any volunteer or compensated position involving the supervision or custody of minors. This is not an employment application. Persons seeking a position in the church as paid employees will be required to complete an employment application in addition to this screening form. Thank you for helping our church provide a safe and secure environment for children and youth who participate in our programs and use our facilities.

## BASIC INFORMATION

FULL NAME

ADDRESS

CITY

STATE

ZIP

CELL PHONE

( )

HOME PHONE

( )

BEST TIME(S) TO REACH ME

EMAIL ADDRESS

DRIVER'S LICENSE #

STATE OF ISSUE

SOCIAL SECURITY #

EMPLOYER

WORK POSITION

WORK ADDRESS

DURATION OF CURRENT EMPLOYMENT

YEARS

MONTHS

HOW LONG HAVE YOU ATTENDED HORIZON

YEARS

MONTHS

EMERGENCY CONTACT (CELL)

( )

NAME/RELATIONSHIP

## FAMILY INFORMATION (OPTIONAL)

MARITAL STATUS

M / S / D

SPOUSE'S NAME (IF MARRIED)

ANNIVERSARY (IF MARRIED)

CHILDREN'S NAMES & AGES

1

AGE

2

AGE

3

AGE

4

AGE

5

AGE

6

AGE

**EDUCATION**

**HIGH SCHOOL**

**CITY**

**STATE**

**GRAD YEAR**

**COLLEGE**

**CITY**

**STATE**

**GRAD YEAR**

**DEGREE(S)**

**OTHER ED/TRAINING/LICENSES**

**MINISTRY EXPERIENCE**

**1 CHURCH**

**CITY/STATE/ZIP**

**AREA OF SERVICE**

**DATES**

**CONTACT PERSON**

**PHONE # ( )**

**2 CHURCH**

**CITY/STATE/ZIP**

**AREA OF SERVICE**

**DATES**

**CONTACT PERSON**

**PHONE # ( )**

**3 CHURCH**

**CITY/STATE/ZIP**

**AREA OF SERVICE**

**DATES**

**CONTACT PERSON**

**PHONE # ( )**

**TELL US ABOUT YOURSELF**

**WHEN & HOW DID YOU BECOME A CHRISTIAN?**

Large empty text area for response.

**WHAT HAVE YOU BEEN DOING TO GROW SPIRITUALLY IN THE PAST YEAR?**

**PLEASE EXPLAIN HORIZON'S VISION STATEMENT TO THE BEST OF YOUR UNDERSTANDING**

**REFERENCES**

Please provide three character references (other than family members) who can identify your strengths & weaknesses and describe your background.

<b>1</b>	<b>NAME</b>		<b>RELATIONSHIP</b>	
	<b>EMAIL</b>			
<b>2</b>	<b>NAME</b>		<b>RELATIONSHIP</b>	
	<b>EMAIL</b>			
<b>3</b>	<b>NAME</b>		<b>RELATIONSHIP</b>	
	<b>EMAIL</b>			



**YOUTH MINISTRY AREA**

**JR. HIGH (6TH-8TH GRADE)**

**HIGH SCHOOL (9TH-12TH GRADE)**

**WHY DO YOU DESIRE TO BE SERVE THE ABOVE MINISTRY?**

[Empty text box for response]

**ARE YOU ABLE TO COMMIT TO SERVING IN THIS MINISTRY, TO SOME CAPACITY, FOR AT LEAST A YEAR?**

**ARE YOU WILLING TO BE LIVE SCANNED (FINGERPRINTING)?**

**VOLUNTEER CONDUCT & GUIDELINES**

**THE FOLLOWING AREAS ARE VERY IMPORTANT IF YOU ARE TO MAINTAIN A GOOD REPUTATION AND WITNESS. WE NEED YOUR COMPLIANCE IN EACH OF THESE AREAS FOR YOU TO BE A VOLUNTEER.**

1. You must NOT have a lifestyle that is contrary to clear Bible principles (this includes anything displayed on your social networking sites). We're asking you to live above reproach in all areas of your life. (Appearance of impropriety, sin, etc.)
2. Do NOT plan activities with students without pastoral and parental approval.
3. Attend church at Horizon on a regular basis.
4. Never date or in any way pursue a romantic relationship with students in the youth ministry.
5. Youth leaders must show wisdom and discernment in dealing with the students of the opposite gender. (texting, social networking, etc.) We consider texting, emailing, or messaging students of the opposite gender on a consistent basis inappropriate. In addition, communicating with students of the opposite gender after 9PM is not allowed.
6. Do not voice critical opinions about any Christian church, staff, parents, or students in front of students.
7. Do not use illegal drugs.
8. Do not get drunk, and be discerning of your use of alcohol in public areas, etc.
9. When driving students you must obey all laws and use safe driving habits.
10. Never drive a student of the opposite sex anywhere alone. No exceptions!
11. Male leaders are expected to spend time primarily with male students, female leaders with female students. Do not initiate touch with the opposite sex (back-rubs, hugs, etc.). If a student initiates a hug, don't refuse; just give them the good 'ol one-arm-hug.
12. You must carry personal auto insurance if you plan on driving any of the students around.
13. You must report to your youth pastor any of the following situations within 24 hours:
  - Physical abuse reported to you.
  - Sexual abuse of any minor reported to you.
  - When a student tells you he/she is suicidal (take them seriously).
  - When a student is in a life threatening situation.
  - When a student confesses pregnancy to you.
  - If you become involved in a runaway situation.
  - When a student confesses a felony to you.

\*If any of the above guideline rules are broken, it is up to the youth pastor as to what type of discipline is to be taken.

**I HAVE READ THE ABOVE AND ACCEPT THE VOLUNTEER CONDUCT AND GUIDELINES CONTRACT.**

**I HAVE ALSO RECEIVED, READ, AND AGREE TO ABIDE BY THE CHILD PROTECTION POLICY.**

<b>PROSPECTIVE VOLUNTEER SIGNATURE</b>	<b>DATE</b>	/	/	
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## BACKGROUND INFORMATION

HAVE YOU AT ANY TIME, BEEN INVOLVED IN OR ACCUSED, RIGHTLY OR WRONGLY, OF SEXUAL ABUSE, MALTREATMENT, OR NEGLECT?

NO  YES

HAVE YOU EVER BEEN ACCUSED OR CONVICTED OF POSSESSION / SALE OF CONTROLLED SUBSTANCES OR DRIVING UNDER THE INFLUENCE OF ALCOHOL OR DRUGS?

NO  YES

ARE YOU USING ILLEGAL DRUGS?

NO  YES

HAVE YOU BEEN ARRESTED OR CONVICTED FOR ANY CRIMINAL ACT MORE SERIOUS THAN A TRAFFIC VIOLATION?

NO  YES

HAVE YOU EVER BEEN INVOLVED ROMANTICALLY OR SEXUALLY WITH ANY STUDENT IN THE YOUTH MINISTRY, OR HAD SEXUAL RELATIONS WITH ANY MINOR AFTER YOU BECAME AN ADULT?

NO  YES

HAVE YOU EVER BEEN ASKED TO STEP AWAY FROM MINISTRY OR WORK WITH STUDENTS OR CHILDREN IN ANY SETTING, PAID OR VOLUNTEER?

NO  YES

HAVE YOU EVER GONE THROUGH TREATMENT FOR ALCOHOL OR DRUG ABUSE?

NO  YES

HAVE YOU EVER BEEN A VICTIM OF ANY FORM OF CHILD ABUSE?

NO  YES

IF YES, WOULD YOU LIKE TO SPEAK TO A COUNSELOR OR PASTOR?

NO  YES

IS THERE ANYTHING IN YOUR PAST OR CURRENT LIFE THAT MIGHT BE A PROBLEM IF WE FOUND OUT ABOUT IT LATER?

NO  YES

IF THE ANSWER TO ANY OF THE ABOVE QUESTIONS IS "YES," PLEASE ATTACH ANOTHER PAGE AND WRITE A FULL EXPLANATION. THESE WILL BE DISCUSSED CONFIDENTIALLY DURING YOUR INTERVIEW.

**DRIVER APPLICATION**

**EFFECTIVE YEAR**

**DRIVER'S LAST NAME**  **FIRST**  **MI**

**DRIVER'S LICENSE #**  **STATE OF ISSUE**  **EXP DATE**  /  /

**ADDRESS**  **CITY**  **STATE**  **ZIP**

**CELL PHONE** (  )  **HOME PHONE** (  )

**BIRTHDATE**  /  /  **SOCIAL SECURITY #**

**LICENSE TYPE**

**OPERATORS**  **COMMERICAL (CDL)**  **CHAUFFER**  **OTHER (SPECIFY)**

**DRIVER INFO / HISTORY**

**\*IF YOU HOLD A CDL, PLEASE ATTACH A COPY OF YOUR CURRENT HEALTH FORM\***

**DATE OF LAST PHYSICAL**  /  /

**DO YOU AGREE TO NEVER BE UNDER THE INFLUENCE OF ANY DRUG THAT MAY IMPAIR SAFE DRIVING WHILE TRANSPORTING STUDENTS OR ADULTS?**

**NO**

**YES**

**PLEASE DESCRIBE ANY DRIVER TRAINING THAT YOU HAVE RECEIVED:**

**HAVE YOU BEEN CONVICTED OF ANY MOVING VIOLATIONS IN THE LAST 5 YEARS?**

**NO**

**YES**

**IF YES, PLEASE DESCRIBE EACH CONVICTION:**

**DO YOU HAVE ANY RESTRICTIONS OR ENDORSEMENTS ON YOUR DRIVERS LICENSE?**

**NO**

**YES**

**IF YES, PLEASE LIST EACH RESTRICTION/ENDORSEMENT:**

HAVE YOU BEEN INVOLVED IN ANY MOTOR VEHICLE ACCIDENTS IN THE LAST 7 YEARS?

NO

YES

IF YES, PLEASE BRIEFLY DESCRIBE EACH ACCIDENT AND INCLUDE DATE:

[Empty text box for accident details]

HAVE YOU BEEN CONVICTED OF A DUI, OR HAD YOUR LICENSE REVOKED OR SUSPENDED IN THE PAST 10 YEARS?

NO

YES

IF YES, PLEASE PROVIDE COMPLETE DETAILS:

[Empty text box for DUI details]

DO YOU CARRY PERSONAL AUTO INSURANCE?

NO

YES

IF YES, PLEASE PROVIDE THE FOLLOWING:

**INSURANCE COMPANY** [ ] **POLICY #** [ ]

DOES OUR CHURCH OR MINISTRY HAVE ANY REASON TO BE CONCERNED ABOUT YOUR ABILITY TO BE A RESPONSIBLE AND CAREFUL DRIVER?

NO

YES

IF YES, PLEASE BRIEFLY DESCRIBE:

[Empty text box for church concern]

I certify that all the information on this application is truthful and completely accurate. I agree to notify the church within 14 days of any changes in any of the above information. I authorize the church to verify this information with the Department of Motor Vehicles and to check references on my driving. I understand that false statements on this application will constitute grounds for immediate dismissal.

BY SIGNING, I AGREE TO ABIDE BY SAFETY PROCEDURES ESTABLISHED BY THE CHURCH AND ABIDE BY ALL LAWS.

**SIGNATURE** [ ] **DATE** / /

**PRINT NAME CLEARLY** [ ]

\*PLEASE ATTACH A PHOTOCOPY OF BOTH SIDES OF YOUR DRIVER'S LICENSE TO THIS FORM\*

**OFFICE USE ONLY**

**DMV CHECK** [ ] **DATE** / / **CONTACT NAME** [ ]

**CLEARED W/ INSURANCE CO.** [ ] **DATE** / / **CONTACT** [ ]

**APPROVED TO DRIVE** [ ] **DATE** / /

**WAIVER / RELEASE**

I, the undersigned, give my authorization to **HORIZON CHRISTIAN FELLOWSHIP** representatives—hereafter referred to as HCF—to verify the information on this form. HCF may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a church ministry worker. I am willing to request and submit to HCF background reports on myself from the (state) Department of Social Services central registry.

**THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE.**

I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for student ministry. In consideration of the receipt and evaluation of this application by HCF, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that may at any time result to me, my heirs, or family, because of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the constitution, statement of faith and policies of HCF, and to refrain from conduct unbecoming to Christ in the performance of my services on behalf of HCF. If I violate these guidelines, I understand that my volunteer status may be terminated. By signing this application, I state that all of the information given about myself is true.

**I FURTHER STATE THAT I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN ACT.**

<b>PRINT NAME</b>	
<b>SIGNATURE</b>	<b>DATE</b> / /
<b>WITNESS</b>	<b>DATE</b> / /