

Volunteer Application Instructions

Thank you for your interest in volunteering at Saint Elizabeth of Hungary Parish.

1. Complete the **Volunteer Service Request Form** and sign and date where indicated.
2. The Diocese of Rockville Center requires **VIRTUS** training, acknowledgement of the Parish Codes of Conduct, and a Background Screening for all volunteers. Virtus Training is available via ZOOM meetings or at various Parish locations but you must pre-register online.

Registration instructions are below to assist you.

- Visit www.virtusonline.org and click the First Time Registrant link on the left.
 - Create a User ID and Password to establish your account and complete the contact fields.
 - Select Saint Elizabeth of Hungary, Melville in the drop down menu for parish location.
 - Choose Volunteer as the Primary Role and Continue.
 - The Pastoral Code of Conduct and Volunteer Code of Conduct will appear which you can download for later reference. Please acknowledge with your name and date that you have received the document.
 - Choose a VIRTUS class session that you wish to attend.
 - The next screen will bring you to an information page about Background Screening and prompt you to begin your online Sterling Volunteer background Check.
 - Complete the fields including name, DOB, SSN, and contact information as prompted on the Sterling website to submit your authorization for the background check.
3. Upon completion of your VIRTUS session, you will receive a proof of attendance certificate that must be returned to Saint Elizabeth before you can begin to volunteer.

Please submit your signed and dated application along with your proof of VIRTUS training to the parish. You can begin to volunteer when **ALL** of the above steps have been completed. A member of our pastoral team will confirm when you are approved to begin.

Thank you for your cooperation as we work together for a safe environment for our parish community.

Father Irinel Racos
Pastor



Volunteer Service Request Form

St. Elizabeth of Hungary Parish

REQUEST: Please complete all of the information, sign and date it. Please print.

Name _____
Last First Middle

Home Phone #: _____

Cell Phone #: _____

Date of Birth: _____

E-Mail Address: _____

Address: _____
Include Street Location (Not PO Box), City, State and Zip Code

For checking prior records, provide other names you have used: _____

Ministry or Ministries Requested: _____

How long have you been a member of our parish or school community? _____

Circle the days you can volunteer: **M T W T F Sa Su**

List times you are available each day: _____

Have you previously volunteered for a church ministry? If YES, please list the date(s), parish or school name and location, and the ministry you performed.

List any training for church ministry you have received: _____

Have you ever been discharged from volunteering for any reason? Yes No

If Yes, please explain: _____

Have you ever been convicted of a crime other than a minor traffic violation? Yes No

If Yes, please explain: _____

Do you currently use illegal drugs? Yes No

Are you aware of any situation that would affect your ability to serve as a volunteer? Yes No

If Yes, please explain _____

What level of education have you attained? <ES ES HS AA/AS BA/BS MA/MS >MA/MS

List foreign languages you know and indicate level of proficiency and fluency:

Speak: _____ Read: _____ Write: _____

What computer software do you know? _____

Typing: _____ wpm Driver's License Type: Chauffeur Commercial Regular



Signature of Volunteer _____

Date _____

APPROVAL

FOR ADMINISTRATOR USE ONLY

Request to serve as a volunteer: Approved Denied Notes: _____

Approved Ministry

Start Date ___/___/___ Supervisor _____

Conditions: _____

Request Approved By: _____
Signature Date

Print Signer's Name and Title

Volunteers: Please read the following carefully upon approval of your request.

- 1. I have read this entire form. I understand and agree to all of its contents. I certify that all answers given on this form are true and complete to the best of my knowledge, and I understand that falsification in any detail is grounds for disqualification from further consideration or for dismissal from any volunteer role with a parish, school or other entity.**
- 2. I agree to inform the parish, school or other entity of any changes to the foregoing information.**
- 3. I acknowledge my responsibility to become familiar and comply with the Diocesan Child Protection Policy, which consists of the Code of Pastoral Conduct and the Volunteer's Code of Conduct, and be responsible to follow the policies and procedures it contains.**
- 4. I understand that I must comply with the policies, rules and precepts of the entity I serve.**



Volunteer Signature

Date

FOR ADMINISTRATOR USE ONLY

Screening Form Completed

VIRTUS Training Scheduled: _____ VIRTUS Training Occurred: _____

Notes: _____