



# RENEWAL APPLICATION FORM \*

\* This form must be completed **annually** by those who are currently involved in any position, paid or volunteer, with CEF OF EASTERN PA, INC.

## PERSONAL INFORMATION

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Ethnicity \_\_\_\_\_

1. In which programs are you currently involved? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Have you at any time ever

- Been arrested for any reason other than a minor traffic violation?  Yes  No
- Been convicted of, or pleaded no contest to, any crime?  Yes  No
- Engaged in, or been accused of, any child molestation, exploitation, or abuse?  Yes  No

Are you aware of

- Having any traits or tendencies that could pose any threat to children, youth, or others?  Yes  No
- Any reason why you should not work with children, youth, or others?  Yes  No

If the answer to any of these questions is "Yes," please explain in detail. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*(Please attach additional pages if more space is needed.)*

## APPLICANT VERIFICATION AND RELEASE

I recognize that the organization to which this application is being submitted is relying on the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I agree to abide by all policies and procedures of the organization and to protect the health and safety of the children and youth at all times.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_