

Ministry Suitability Form and Covenant of Care

This form is to be filled out by anyone employed by the Archdiocese or a parish, or as a volunteer in a high risk ministry (as defined in Policy 5.1.1 of the Archdiocese of Grouard-McLennan's Policy Manual).

Name: _____

Address: _____

Town/City: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

e-mail: _____

Have you ever been **accused** of abuse or inappropriate behaviour with children, adolescents or vulnerable adults?

No

Yes

Have you ever been **charged** with abuse or inappropriate behaviour with children, adolescents or vulnerable adults or with any other crime?

No

Yes

I agree to abide by the Code of Conduct of the Archdiocese of Grouard-McLennan (see attached or Policy 5.1.2) as my commitment to serve and to be seen to serve all persons with purity and unselfish love in a Covenant of Care that honors the intrinsic worth of each person, and I acknowledge that any breach of the Code of Conduct on my part will result in appropriate disciplinary action.

Signature

Date