



Youth Camp Worker Application Process

SOUTH CAROLINA CONFERENCE OF THE
INTERNATIONAL PENTECOSTAL HOLINESS CHURCH,
INC.

1. Complete the enclosed application after reading attached materials.
2. Return application to:
SC Conference – Discipleship Ministries
PO Box 1689
Lake City, SC 29560
3. Instructions are attached regarding steps to follow to obtain the required FBI criminal background report.
4. **Helpers MUST be 16 years old or older!**

APPLICATION FOR YOUTH CAMP WORKER

S.C. Conference IPHC, Inc.

Discipleship Ministries

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision of minors.

Youth & Children's Workers Background Screening Information

Page 5 is for you to complete and return with your application giving us permission to perform your background check. Without this, your application can not be considered.

I am interested in serving as a worker in Youth Ministry. If I am selected by the DM Director/Board, I will observe the rules and regulations for the workers as set by the DM Department, and I will do my best to help reach our youth for Christ.

*****HELPERS MUST BE 16 YEARS OLD OR OLDER**

PERSONAL INFORMATION

Name _____ Age _____

Social Security No. _____ Sex _____

Present Address _____

City _____ State _____ Zip _____

Home Phone _____ Office Phone _____

E-Mail _____

Have you read the Covenant of Commitment and Guidance attached to this Application?

Can and will you comply with the Covenant of Commitment and Guidance while serving the International Pentecostal Holiness Church as a Youth Camp Worker? _____

Have you read the Youth Camp Counselor Guidelines including the Requirements, Job Description and role descriptions as Spiritual Advisor and Department Advisor? _____

Can and will you comply with the Guidelines with or without reasonable accommodation? _____

If accommodation for a physical or mental disability is needed, you are invited to seek such accommodation by applying with the camp director.

Have you ever been arrested or convicted of a felony, a misdemeanor, crime of moral turpitude or any offense including, but not limited to, child abuse and/or child neglect? _____. If so, state nature of offense(s), when, where and disposition.*

*The existence of a conviction or pending charge will not necessarily preclude you from employment volunteer services. The nature and/or gravity of the offense or offenses, the time that has passed since conviction or completion of the sentence, and the nature of the job held or sought will all be considered.

Prior Work Experience

Dates From To	Name, Address and Telephone Number of Employers	Supervisor's Name/Title	Reason for Leaving

Describe any relevant work, volunteer experience of skills.

Personal Reference

Name _____

Address _____

Relationship _____ Dates known _____

Home phone _____ Office phone _____

Name _____

Address _____

Relationship _____ Dates known _____

Home phone _____ Office phone _____

Name _____

Address _____

Relationship _____ Dates known _____

Home phone _____ Office phone _____

APPLICANTS STATEMENT

The information contained in this application is correct to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume or other materials, or during any interviews, can result in refusal of employment, or termination from the church Conference’s services. In processing this application, the Conference may verify all the information provided by me. I authorize any reference, former employer, church, educational institution or other organization listed in this application to give any information they may have regarding my character and fitness for children/youth work, and I release all such references from liability for any damage that may result from furnishing such evaluations to you.

Should my application be accepted, I agree to be bound by the constitution, bylaws, and policies of the S.C. Conference of the International Pentecostal Holiness Church, Inc. and I further agree to refrain from unscriptural conduct in the performance of my services on behalf of the International Pentecostal Holiness Church, I understand that if selected, I will serve at the will of the Conference and my services may be terminated with or without reason or notice.

I understand that, if selected, as a condition of continued service as a Youth Camp Counselor, I may be required to undergo and successfully pass a screening for alcohol and/or drugs.

The use of tobacco, Vapes (included Drags, Vape Juice, Pods, Starter Kits, Vape Coils), alcoholic beverages, and any addictive drugs are PROHIBITED. Anyone caught with a substance will Immediately be sent home. Some occasions could include Law Enforcement.

The SC Conference DM Council will use the IPHC Position paper (Marriage and Sexual Morality) regarding matters of sexuality for campers and staff.

Applicant’s Signature _____ Date _____

Pastor’s signature serves as a recommendation and is required for all applicants.

Pastor’s Signature _____ Date _____

Camp(s) I desire to serve:

____ **Teen** (counselor) ____ **Junior** (counselor) ____ **Primary** (counselor)
____ Helper (custodian/aide) ____ Helper (custodian/aide) ____ Helper (custodian/aide)

T-Shirt Size: Adult Small _____ Adult Medium _____ Adult Large _____ Adult 1X _____
Adult 2X _____ Adult 3X _____

There will be a mandatory staff meeting on Sunday afternoon before each camp at 3:00 pm.
If you can’t arrive on time for the staff meeting there is no need to apply.

Return to:
SC Conference Discipleship Ministries
P.O. Box 1689
Lake City, SC 29560

Questions Call:
1-843-394-8509 ext. 133 or 123

HEAD LICE POLICY Camp Robinson has a NO NIT policy regarding head lice. I understand that even if my child(ren) has/have been treated they will **not** be allowed to stay at Camp Robinson if they have nits. Original deposits will not be refunded.

Hospitalization Insurance Coverage Information

Insurance Company and/or
Government Program: _____
Address: _____
Subscriber ID or Contract Number: _____
Insurance Co. phone # _____
Admission Pre certification Phone# _____
Group Name (Employer) _____
Group Number: _____
Employer's Address: _____
Employer's Phone #: _____

List Current Prescription Drug (s) & dosage:

Medications must be sent in original labeled containers.

List any medical conditions/disabilities/allergies: _____

AUTHORIZED SIGNATURE
REQUIRED: _____

DATE: _____

CONSUMER AUTHORIZATION

- I. I understand that an investigative report may be generated on me that may include information as to my character, general reputation, personal characteristics, or mode of living; work habits, performance or experience, along with reasons for termination of past employment/professional license or credentials; financial/credit history; or criminal/civil/driving record history. I understand that General Information Services, Inc., on behalf of SC Conference IPHC, Inc. may be requesting information from public and private sources about any of the information noted earlier in this paragraph in connection with SC Conference IPHC, Inc.'s consideration of me for employment, promotion or position re-assignment or contract now, or at any time during my tenure with SC Conference IPHC, Inc., and give my full consent for the information to be obtained.
- II. IF APPLICABLE, Medical and worker's compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws. According to the **Fair Credit Reporting Act** (FCRA, Public Law 91-508, Title VI), I am entitled to know if the considerations for which I am applying are denied because of information obtained from a consumer reporting agency. If so, I will be notified and be given the name of the agency providing that report.
- III. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this release shall be as valid as the original. This release is valid for most federal, state and county agencies.
- IV. I understand that if I am a resident of **South Carolina/North Carolina (only)** I may obtain a copy of the report ordered, and now indicate my desire to do so by checking this box .
- V. I hereby authorize, without reservation, any financial institution, law enforcement agency, information service bureau, school, employer or insurance company contacted by General Information Services, Inc. to furnish the information described in Section I.

CANDIDATE COMPLETE THE FOLLOWING:

Signature

Today's Date

Please print full name

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.

Month, Day and Year of Birth

Social Security Number

Home Address

City

State

Zip

Driver's License Number and State

Name as it appears on License

Have you ever been convicted of a crime: ___ No ___ Yes If yes, please provide city and State of conviction and details of conviction.

FAIR CREDIT REPORTING ACT NOTICE:

In accordance with the Fair Credit Reporting Act (FCRA, Public Law 91-508, Title VI), this information may only be used to verify a statement(s) made by an individual in connection with legitimate business needs. The depth of information available varies from state to state. Status of updates are available on request. Although every effort has been made to assure accuracy, General Information Services, Inc. cannot act as guarantor of information accuracy or completeness. Final verification of an individual's identity and proper use of report contents are the user's responsibility. General Information Services, Inc.'s policy requires purchasers of these reports to have signed a Service Agreement. This assures General Information Services, Inc. that users are familiar with and will abide by their obligations, as stated in the **FCRA**, to the individuals named in these reports. If information contained in this report is responsible for the suspension or termination of an employee or the application process, have the Candidate/employee contact General Information Services, Inc.

NOTICE TO CALIFORNIA CANDIDATES

You have a right to obtain a copy of any consumer report or investigative consumer report obtained by (INSERT COMPANY NAME) by checking the box provided below. The report will be provided to you within three (3) business days after we receive the requested reports related to the matter investigated.

I request to receive a free copy of this report by checking this box

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by GIS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at GIS in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

SOUTH CAROLINA CONFERENCE of the IPHC, INC.
Youth Camp counselor Guidelines

➤ Requirements

1. A counselor must be a Christian
2. A counselor must have a good rapport with young people.
3. A counselor must be responsible and dependable.
4. If a counselor has children (under or over the camper age) they must make arrangements to leave the children at home. Only camp age children are permitted to come to camp with the counselor and they must be registered as a camper and pay the tuition.
5. A counselor must cooperate with the camp program.

➤ Counselor Job Description

1. Counselors will work under the supervision of the Camp Director and Camp Dean.
2. Counselors are to be present at the camp by time scheduled on the day of when camp begins (if this is not possible please do not apply).
3. The counselor will fill two roles: Spiritual Advisor and Department Advisor.

➤ Spiritual Advisor

1. On the first day, through personal counseling, find out the spiritual status of each camper in your cabin.
2. Have daily devotions.
3. Prepare the campers for the worship services by talking with them concerning their spiritual needs. This is not to be a forceful approach, ask the Holy Spirit to give you wisdom.
4. Assist in every way possible in the night services. **YOU ARE EXPECTED TO BE AN ALTAR WORKER.** Our goal is to help every camper to be the best he/she can for the Lord.

➤ Department Advisor

1. Counselors should be in their cabins on opening day before the campers arrive. Stay at your cabin until all campers have arrived.
2. Assist the campers in getting settled in. Help them make their beds (Junior & Primary).
3. Counselors should be aware of where his/her campers are at all times
 - No camper is to be left alone in a cabin unless approved by the Camp Dean or Camp Director.
 - Counselors should be with their campers during recreation.
 - Campers are not to be in the paddle boats unless at least one counselor is observing.
 - Counselors are responsible for having their campers on time for all activities.
4. Counselors are to be sure their cabins are cleaned each day.
5. Counselors are to encourage each camper to participate in the camp program
6. On Thursday the Counselor must stay until all their campers have been properly signed out (sign out sheets)
7. Have your cabin inspected by the Camp Dean on Thursday before leaving.
8. Counselors are not to do anything that would suggest any sexual advancement (no insinuations of any kind).

Special Note:

We will try to give each counselor some free time. The Camp Dean will inform you of when these times are. We will have designated time for male counselors to use the pool. All female counselors will also have a designated time to use the swimming pool. I recommend that you spend some of that time RESTING.

Junior & Primary Camps:

- ❖ Please see that all campers take showers every day. Watch for Ticks, Fleas, Etc.

Covenant of Commitment

The Pentecostal Holiness Church is committed to Jesus Christ and His kingdom. This commitment involves a biblical lifestyle. We believe that the Bible is God's infallible Word and the believer's guide and final authority for both faith and conduct (2 Timothy 3:16-17). We are totally committed to the Bible as God's written Word to man. We believe that a top priority of Christians in this world is to multiply believers and multiply churches as a means of extending the kingdom of God. We must, therefore, follow a lifestyle that gives impetus to this purpose. As members of the army of God we are involved in spiritual warfare, and thus under military discipline (2 Timothy 2:3-4). Other considerations must take second place to our primary purpose in life. We are mobilized on a wartime basis. Every facet of our lives must come under divine authority (1 Corinthians 10:31).

OUR BODIES

Since our bodies are the temples of the Holy Spirit and instruments of righteousness (1 Corinthians 6:19; Romans 6:13), we must keep our bodies clean and consecrated for the Master's use. From the beginning of our existence as a denomination we have expected our members to abstain from the use of tobacco, alcoholic beverages, and addictive drugs. We have also maintained a strong position against premarital, extramarital, and deviant sex, including homosexual and lesbian relationships, refusing to accept the loose moral standards of our society. We commit ourselves to maintaining these disciplined lifestyle with regard to our bodies (Romans 12:1-2)

OUR MINDS

The mind is also the dwelling place of God. We believe that our minds should be kept pure and positive in the midst of an impure and negative world (Philippians 4:7-8). It is for this reason that our members are to govern their "mental" diet. The profanity and pornography that pervade our modern media- both print and video-make it imperative that Christians discipline their minds by refusing to feed upon that which is profane, vulgar, or hedonistic. Thus Pentecostal Holiness members are to avoid material that panders to the profane and pornographic, while consciously replacing it with wholesome material that nurtures and strengthens the spiritual man. We hold a deep commitment to the study of the Bible.

OUR SPIRITS

Our commitment includes our spirits. The spirit of this world is hostile to the spirit of the Christian (Galatians 5:17; 1 Corinthians 2:12-14). The spirit rulers of this present darkness are ever at work to establish strongholds in the midst of unsuspecting believers, to impose upon them the mind-set of the world. We must guard against the hatred and hostility that breed so easily in the human spirit. The greed and selfishness that motivate much of our modern culture is contrary to our Christian faith and testimony. We therefore urge all our members to exhibit the "mind of Christ" in all their attitudes (Philippians 2:5-11).

OUR SPEECH

Our speech reveals much about us (Matthew 12:34-37).

The Christian should be known by his wholesome conversation. Our members are to refrain from speaking anything that is unclean, untrue, unkind, or unprofitable. We must make sure that our talk affirms, rather than hinders, our testimony.

OUR RELATIONSHIPS

Our relationships reveal our preferences and positions. Thus our people are not to align themselves with organizations or movements that stand in contradiction to Christian principles (2 Corinthians 6:14-18). The believer's commitment to Jesus Christ stands above his commitment to any political party or economic structure or social institution. Any time there is a conflict between the Christian's commitment to Christ and his commitment to any other relationship, he must recognize that all other commitments are governed by this highest commitment (Luke 14:26-27). All our members are to be honest and ethical in all their relationship (Romans 12:17).

OUR FAMILIES

The family is the basic unit of society. The divine origin of the family makes it of vital concern both to the church and to society. Our commitment to a biblical lifestyle profoundly impacts the family. We give priority to the sanctity of marriage and to the biblical pattern of relationships in the home. While the husband is recognized as the head of the home, he is also commanded to love and cherish his wife as his own body (Ephesians 5:25, 28). Wives are to respect and honor their husbands (Ephesians 5:22-23).

Parents are to teach and correct their children, but at the same time refrain from provoking them to anger and resentment (Ephesians 6:1-4). Children are to respect and obey their parents. Christian families should worship together, play together, and work together. The relationships in the Christian family should reflect the healing that Christ brings to all human relationships.

OUR STEWARDSHIP

Our commitment to Jesus Christ includes stewardship. According to the Bible everything belongs to God (Psalm 24:1). We are stewards of His resources. Our stewardship of possessions begins with the tithe (Malachi 3:8-10). All our members are expected to return a tenth of all their income to the Lord. This tithe is to be paid into the "storehouse." This storehouse is the treasury of the local church or conference to which this member belongs. In addition to the tithe, all our members are expected to give offerings out of the ninety percent of God's wealth which He allows them to use (1 Corinthians 16:2).

OUR LOYALTY

Loyalty to Christ and His church are basic to the success of the Pentecostal Holiness Church. The faithful participation of every member, both lay and clergy, and every local church and quadrennial conference in the various ministries of the church is necessary if the Pentecostal Holiness Church is to fulfill its mission. Loyalty involves commitment to all the ministries of the denomination. Since leaders should be role models, all those in leadership in the local church, the quadrennial conference, and the general church should set an example by their faithfulness in supporting the ministries of the church. Loyalty involves attendance at the gatherings of the church. This is vital at local church, quadrennial conference, and denominational gatherings (Hebrews 10:25). Loyalty involves financial support. Faithfulness in tithes and offerings is essential to the prosperity of God's people (Malachi 3:8-12). This applies to local church members, quadrennial conferences, and all other individuals and entities of the church.

CONCLUSION

This Covenant of Commitment is intended as a guideline for all our members, not a system for monitoring and judging one another. Neither is this Covenant of Commitment to be considered an exhaustive statement concerning a biblical lifestyle. The Bible, both Old and New Testaments, is our complete and final authority. A careful, conscientious, and continual study of God's Word will reveal to the believer a growing understanding of what it means to live worthy of our calling in Christ Jesus. Any member having difficulty in following a biblical lifestyle or this Covenant of Commitment should be given loving nurture and patient instruction in order to lead him to maturity and restoration, if needed (Galatians 6:1).

There are times when, in spite of every effort to nurture and restore a member, no alternative but excommunication can be found. When a member refuses to heed the loving admonitions of the church to follow a Christian lifestyle, he or she must be excommunicated from the fellowship of the church. However, excommunication is a last resort, and is administered only in flagrant cases of heresy, divisiveness, or immorality (Matthew 18:15-17); Titus 3:10; Romans 16:17-18; 1 Corinthians 5:1-5). The primary purpose for this commitment to a disciplined lifestyle is to strengthen the position of our members as Great Commission Christians, and thus to firmly establish our denomination as a Great Commission movement. We feel that the Pentecostal Holiness Church has a vital part to play in world evangelism. Our aim is to make the multiplying of believers and the multiplying of churches a top priority of the denomination.

CHILD ABUSE AND NEGLECT TRAINING INFORMATION

South Carolina Conference of the International
Pentecostal Holiness Church, Inc.
P.O. Box 1689 / 620 Ron McNair Blvd.
Lake City, South Carolina 29560
Phone: (843) 394-8508 Fax: (843) 394-3470
Web: sciphc.org

FORM PT-003

When asked to provide information

This information may include:

- The reason for reporting
- The child's name and name of other siblings living in the household
- Present location of the child
- The suspected perpetrator's name (if known)
- A description of what you have seen or heard including the date of occurrence, your observations and witnesses to the abuse
- Any agencies that you know that are already involved with the family
- Your name and phone number (can be anonymous)

You may report anonymously if you wish. Under South Carolina law, names of reporters are kept confidential. Families reported for abuse or neglect cannot obtain the names of reporters. Although you may make your report anonymously, only reporters whose identity can be confirmed are entitled to notification of the investigation's outcome. However, your information will not be revealed to the family or individuals involved in the report.

Tips for reporting:

- Make the report as soon as possible after receiving the information that causes you to suspect abuse or neglect.
- Do not wait for proof. The law requires you to report when you have reason to believe abuse or neglect has occurred.
- Do not try to investigate yourself or excessively question the child. Ask only basic questions, such as **what** happened, **who** did it and **where** did it happen. Leave the investigation for professionally trained caseworkers or law enforcement officers. You can request notification of the investigations' outcome if you wish.
- If you are a mandated reporter under S.C. law, you must *personally* report information you receive to DSS or law enforcement. Notifying your supervisor does not satisfy your legal requirement to report.
- Document the name of the person you reported to at DSS or law enforcement; the date and time of your report; the information you reported; any disclosures made by the child, in his own words if possible; and the child's demeanor at the time of disclosure.

What happens after I make a report?

Assuming the incident has happened in a family home, your report will be taken by DSS hotline staff. The screening process begins and the following additional steps will be taken:

- Decisions are made by the court of a team of staff based on statutory and policy guidelines.
- The intake worker refers for investigation if the report involved a child under 18, the suspected perpetrator is a parent, guardian or person responsible for the child, and the information meets the statutory definition of abuse or neglect.
- The assessment worker will investigate within a few hours to a few days, depending on the potential severity of the situation. The assessment worker will speak with the child, the parents and other people in contact with the child (such as doctors, teachers, or child care providers). The purpose for the investigation is to determine if abuse or neglect has occurred and if it may happen again.
- If the assessment worker feels the children are at risk of harm, the family will be referred to services to reduce the risk of re-occurrence. These may include mental health care, medical care, parenting skills classes, employment assistance and concrete support such as financial or housing assistance.
- In severe cases, when a child's safety cannot be ensured, the child will be removed from the home and temporarily placed with relatives or in foster care. Home studies are conducted to determine whether the placement is in compliance with state standards and safety can be ensured. A court-ordered treatment plan is put into place the parents' compliance monitored. If the court determines that the children may be safely maintained in the home, the children will be returned to their parents.

IN FLORENCE COUNTY, SOUTH CAROLINA
CALL 843-669-3354 TO REPORT ABUSE/NEGLECT OF A
CHILD OR ADULT
After Hours Reporting call 843-669-3911 or 911

There are four major types of child maltreatment:

- 1. Neglect**
- 2. Physical Abuse**
- 3. Sexual Abuse**
- 4. Emotional Abuse**

Although any of the forms may be found separately, they often occur together. Most child abuse occurs in the family home. However, anyone that comes in contact with a child can inflict abuse. The following are definitions for South Carolina.

Neglect

Neglect is failure to provide for a child's basic needs.

- **Physical:** lack of appropriate supervision or failure to provide necessary food, shelter or medical care.
- **Educational:** failure to educate a child or attend to special educational needs.
- **Emotional:** inattention to a child's emotional needs or allowing a child to use drugs or alcohol.

Situations such as these do not always mean that a child is neglected. Sometimes cultural values, the standards of care in the community and poverty may be contributing factors, indicating that a family needs information or assistance. When a family fails to use information and resources and when the child's needs continue to be unmet, child welfare intervention may be required.

Physical abuse

Physical abuse is non-accidental physical injury. This may range from minor bruises to severe fractures or death as a result of punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting (with a hand, stick, strap or other object), burning or otherwise harming a child. Such injury is considered abuse regardless of whether the caretaker intended to hurt the child or not.

Sexual abuse

Sexual abuse is any act in which a child is used for sexual gratification. Sexual abuse refers to any sexual act with a child by an adult or older child. Examples of these are fondling a child's genitals, penetration, incest, rape, sodomy, indecent exposure and commercial exploitation through prostitution or the production of pornographic materials. This also includes exposure to pornographic materials and sexual acts.

Emotional abuse

Emotional abuse is any pattern of attitude, behavior or failure to act that interferes with a child's mental health or social development. This may include using verbally abusive language to constantly belittle or criticize; threats or rejection; as well as withholding love, support or guidance.

Child abuse or neglect occurs when the parent, guardian, or other person responsible for the child's welfare:

- Inflicts or allows to be inflicted upon the child physical or mental injury or engages in acts or omissions which present a substantial risk of physical or mental injury to the child, including injuries sustained as a result of excessive corporal punishment, but excluding corporal punishment or physical discipline which:
 - Is administered by a parent or person in loco parentis
 - Is perpetrated for the sole purpose of restraining or correcting the child
 - Is reasonable in manner and moderate in degree

- Has not brought about permanent or lasting damage to the child
- Is no reckless or grossly negligent behavior by the parents
- Commits or allows to be committed against the child a sexual offense as defined by the laws of this State or engages in acts or omissions that present a substantial risk that a sexual offense as defined in the laws of this State would be committed against the child.
- Abandons the child
- Encourages, condones, or approves the commission of delinquent acts by the child and the commission of the acts are shown to be the result of the encouragement, or approval
- Fails to supply the child with:
 - Adequate food, clothing, shelter, or supervision appropriate to the child’s age and development
 - Education as required by law. A child’s absences from school may not be considered abuse or neglect unless the school has made efforts to bring about the child’s attendance, and those efforts were unsuccessful because of the parents’ refusal to cooperate.
 - Health care; though financially able to do so or offered financial or other reasonable means to do so and the failure to do so has caused or presents a substantial risk of causing physical or mental injury. For the purpose of this chapter “adequate health care” includes any medical or nonmedical remedial health care permitted or authorized under state law
 - Has committed abuse or neglect as described in previous paragraphs, such that a child who subsequently becomes part of the person’ household is at substantial risk of one of those forms of abuse or neglect.

Indicators of Child Abuse / Neglect

Different types of abuse and neglect have different physical and behavioral indicators.

PHYSICAL ABUSE

Physical Indicators	Behavioral Indicators
Unexplained bruises and welts: <ul style="list-style-type: none"> ● On face, lips, mouth ● On torso, back, buttocks, thighs ● In various stages of healing ● Cluster, forming regular patterns 	Wary of adult contacts Apprehensive when other children cry Behavioral extremes. <ul style="list-style-type: none"> ● Aggressiveness ● Withdrawal
<ul style="list-style-type: none"> ● Reflecting shape of article used in inflict (electric cord, belt buckle) ● On several different surface areas ● Regularly appear after absence, weekend or vacation Unexplained burns: <ul style="list-style-type: none"> ● Cigar, cigarette burns, especially on soles, palms, back or buttocks ● Immersion burns (sock-like, glove-like doughnut shaped on buttocks or genitalia) ● Patterned like electric burner, iron, etc. ● Rope burns on arms, legs, neck or torso Unexplained fractures: <ul style="list-style-type: none"> ● To skull, nose, facial structure ● In various stages of healing ● Multiple or spiral fractures Unexplained laceration or abrasions: <ul style="list-style-type: none"> ● To mouth, lips, gums, eyes 	Frightened of parents Afraid to go home Reports injury by parents

<ul style="list-style-type: none"> To external genitalia 	
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PHYSICAL NEGLECT

Physical Indicators	Behavioral Indicators
Consistent hunger, poor hygiene, inappropriate dress. Consistent lack of supervision, especially in dangerous activities or long periods. Constant fatigue or listlessness Unattended physical problems or medical needs. Abandonment.	Begging, stealing food Extended stays at school (early arrival and late departure) Constantly falling asleep in class. Alcohol or drug abuse Delinquency (e.g. thefts) States there is no caregiver

SEXUAL ABUSE

Physical Indicators	Behavioral Indicators
Difficulty in waling or sitting Torn, stained or bloody underclothing Pain or itching in genital area Bruises or bleeding in external genitalia, vaginal or anal areas. Venereal disease, especially in pre-teens Pregnancy	Unwilling to change for gym or participate in PE Withdrawn, fantasy or infantile behavior. Bizarre, sophisticated or unusual sexual behavior or knowledge. Poor peer relationships Delinquent or run away Reports sexual assault by caregiver.

EMOTIONAL MALTREATMENT

Physical Indicators	Behavioral Indicators
Habit disorders (sucking, biting, rocking, etc.) Conduct disorders (antisocial, destructible, etc.) Neurotic traits (sleep disorders, speech disorders, inhibition of play)	Behavior extremes: <ul style="list-style-type: none"> Compliant, passive Aggressive, demanding Overly adoptive behavior: <ul style="list-style-type: none"> Inappropriately adult Inappropriately infant

**Child Abuse and Neglect Training Information
Acknowledgment and Receipt**

I, *the volunteer*, have received and understand the Child Abuse and Neglect Training Information, and I understand that it is my responsibility to read and comply with Federal, State, and Local laws contained in this form.

Volunteer's Name (Print)

Volunteer's Signature

Date

Conference Staff / Personnel Signature

TO BE PLACED IN VOLUNTEER'S FILE