

**Youth Worker Screening Form**  
New England Yearly Meeting of Friends (NEYM)

*As part of ensuring the safety of our youth, staff and volunteers, NEYM screens adults who work with our children, using the online screening program recommended by our insurance company. The NEYM office will verify your Social Security number and run a National Criminal File Search and needs you to provide the information below. This will be kept strictly confidential and will be shared only with the online screening company for purposes of conducting the screen. This signed form will be kept as documentation in a secure file. Following a successful screening, your name will be added to a list of screened youth workers including only your name and contact information, for NEYM internal use only. In the event any concerns are raised by the screening, the Yearly Meeting Secretary will contact you. Thank you for your service as part of the Youth Ministries of New England Quakers!*

**Name** (First, Middle, Last): \_\_\_\_\_

**Date of Birth** (mm/dd/yyyy): \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

*I give NEYM permission to conduct an online screening using the information I have provided above*

**Your Signature:** \_\_\_\_\_

Please send this signed form to: NEYM Secretary, 901 Pleasant St., Worcester, MA 01602

**Send results of screening to (e-mail):** \_\_\_\_\_

----- cut here to create two forms -----

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