



Episcopal Diocese of Hawaii

St. Mary of Mo'ili'ili

2062 South King Street  
Honolulu, HI 96826

The Rev. Prof. Gregory M. Johnson

Safe Church Program

Phone (808) 949-4655

Fax (808) 949-4655

## BACKGROUND CHECK INFORMATION AND STATEMENT OF RELEASE & AGREEMENT

### Definition of Sexual Misconduct

Sexual misconduct is defined by the Diocese of Hawaii as any

- a) **sexual abuse or sexual molestation** of any person, including but not limited to, any sexual involvement or sexual contact with a person who is a minor or who is legally incompetent; or
- b) **sexual Harassment** in a situation where there is an employment, mentor or colleague relationship between the person involved, including but not limited to: sexually-oriented humor or language; questions or comments about sexual behavior or preference unrelated to employment qualifications; sexualized physical contact; inappropriate comments about clothing or physical appearance; repeated requests for social engagements or
- c) **sexual exploitation**, including but not limited to, the development of or the attempt to develop a sexual relationship between clergy person, employee or volunteer and a person with whom he / she has a pastoral relationship, whether or not there is apparent consent from the individual. It is the policy of the Diocese of Hawaii that sexual abuse, exploitation or harassment of any kind by anyone who undertakes ministry, whether staff person or volunteer of this diocese or any of its congregations or agencies, will not be tolerated.

### General Information

Name \_\_\_\_\_  
*First Middle Last*

Congregation/Position: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male  Female

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Email \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Current Address \_\_\_\_\_  
*City State Zip*

Previous Address \_\_\_\_\_  
*City State Zip*

(over)

**Education**

SCHOOL, COLLEGE, OR UNIVERSITY \_\_\_\_\_

Dates Attended \_\_\_\_\_ Degree \_\_\_\_\_

GRADUATE SCHOOL \_\_\_\_\_

Dates Attended \_\_\_\_\_ Degree \_\_\_\_\_

**Professional License** *(Please list any professional licenses you hold.)* \_\_\_\_\_

**Employment**

PRESENT EMPLOYER \_\_\_\_\_ HIRE DATE \_\_\_\_\_

Street or P.O. Box \_\_\_\_\_

*City*

*State*

*Zip*

Current Position \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

PREVIOUS EMPLOYERS *(LAST FIVE YEARS. PLEASE LIST NAME, ADDRESS, DATES)*

**Statement of Release and Agreement**

I, \_\_\_\_\_ hereby give my permission for the Episcopal Diocese  
*Name (Please print)*

of Hawaii to conduct background checks on me as necessary for my service or employment as

\_\_\_\_\_ at \_\_\_\_\_  
*Position Name of church or church organization and location*

I understand that the information requested is to be mailed directly to and will be held in confidence by the St. Mary of Mo'ili'ili, at 2062 South King Street, Honolulu, HI 96826

I have read, understood and agree to abide by the policies and procedures concerning the issues of sexual abuse, harassment and exploitation. I specifically release the Diocese, its agents and employees from liability in carrying out these policies, including, without limitation, any liability for the disclosure in good faith of any information relating to sexual misconduct relating to me, whether or not the information is correct. This release applies only to information given or publicized in good faith in the course of an official Diocesan proceeding. I affirm and dedicate myself to the highest ethical conduct and behavior in my service within the Diocese.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*