

BAPTIST GENERAL ASSOCIATION OF VIRGINIA

2828 Emerywood Parkway
Henrico, VA 23294
BGAV.org
800.255.2428

Thank you so much for volunteering through the Baptist General Association of Virginia (BGAV). The desire of your church and individual congregants to serve Christ is important to us, and we will do all we can to help fulfill that calling.

As a Kingdom partner, we want to do all that we can do to ensure that we are providing a safe and secure environment for the minors and the intellectually or physically disabled with whom we work and minister to. To help us achieve this goal, we now require that each church complete a criminal background check through a reputable company for each adult 18 years or older planning to participate in a BGAV-sponsored event or mission trip. Any official background check your church has conducted within the past four years is acceptable.

If any background check comes back with a felony or serious driving issue, please contact our business office to confidentially discuss the issue. Any person who is found to have criminal convictions related to sexual offenses or felonies related to children shall in no case be permitted to attend. Some examples of offenses that will restrict a volunteer from service:

- Criminal homicide
- Aggravated assault
- Enticing a child
- Sexual abuse
- Sexual assault (rape)
- Kidnapping or unlawful restraint
- Incest
- Public lewdness or indecent exposure
- Injury to a child
- Abandonment or endangerment of a child
- Crimes related to the possession, use or sale of drugs or controlled substance

This process is not intended to question the character of the individual or their value to BGAV. Our sole concern is that we have done all that we can do to assure all involved that we are providing a safe and secure environment for our minors.

Once background checks have been completed for each person, ensuring that all of the above requirements have been met, please have a ministerial staff member or church officer complete and sign the certification statement and return to us three (3) weeks prior to the event.

We are deeply grateful for your partnership and excited that you want to help advance the Redeemer's Kingdom as part of the BGAV.

Sincerely,



David B. Washburn, Treasurer



Baptist General Association of Virginia
**SPONSOR/VOLUNTEER
 SCREENING CERTIFICATE**



Please list the name of each adult (18 years and older) who will be coming with your group (including staff, chaperones and visitors). You will need to conduct a criminal background check through a reputable company for each person listed. Any official background check that your church has conducted within the past four years is acceptable. If any background check comes back with a felony or serious driving issue, you must contact Leslie Straw to confidentially discuss issue at 800.255.2428, ext. 1296. (No personal information needs to be shared, only incident or issues). Any person who is found to have criminal convictions related to sexual offenses or felonies related to children shall in no case be permitted to attend.

A ministerial staff member or officer of your church must complete and sign the certification statement at the bottom of this page. The completed forms are due three (3) weeks prior to the event. Failure to comply may result in an inability to participate in the event or trip. Thank you for making the effort to protect the well-being of all our participants, as well as your own children and adults.

In addition, each volunteer must sign the Baptist General Association of Virginia Sponsor/Volunteer Expectations form. Please return all documents to _____.

Adult's Name	Gender (M/F)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

I certify that our church, named below, has conducted a criminal background check for each person listed above, and we affirm him or her as an adult sponsor/volunteer for our group. I further certify that I am a staff member or officer of the church named below and, thereby, an official representative of the church.

Church Name _____

Church Phone Number _____

Church Address, City, State, ZIP _____

Ministerial Staff Member/Officer of the Church (Name Printed) _____

Ministerial Staff Member/Officer of the Church (Signature) _____

Date _____

Name of Event/Trip Attending _____

Date of Event Attending _____