## CENTRAL CONGREGATIONAL CHURCH, UCC

One Worthen Street P.O. Box 339 Chelmsford, MA 01824 Phone 978-256-5931 Fax 978-250-3565 <u>office.admin@cccchelmsford.org</u>

This form for:
Sunday School teachers
Nursery workers
Chaperones
Youth workers not requiring primary disclosure
form (see Policies & Procedures, Sec. C3)

## SECONDARY DISCLOSURE FORM

Name					
	Last	First	Μ	iddle	
Address	Street Address				
	City	Sta	te Zip	o Code	
Home Ph	none	Work Phone	Ce	11	
	I am seeking to fi anday School Tea	ll: cher Nursery Supervise	or Chap	erone Other	
I have be	en a member/frie	nd (circle one) of Central Cong	regational Chu	rch since	
	is a chance that y the following inf	you may choose to drive for a formation:	field trip or o	ther youth event, plea	
		rized drivers for youth events a st 22 years of age. I am 22 year	v	0	
I have a	valid driver's lice	nse.		TrueNot Tru	
State in v	which driver's lice	ense is issued Driver's lic	ense number _		
I have au	to insurance	_TrueNot True Auto insu	arance compan	у	
last five		g record, I have not had my lice ess driving or driving while int	oxicated and/or		
you bein Yes	g entrusted with t	stance involving you or your ba he responsibilities of the position	0	-	
n yes, pl	ease explain:				