

WEST MICHIGAN CONFERENCE OF THE UNITED METHODIST CHURCH

REPORT OF CARE PROVIDER **APPLICANT INTERVIEW**

CONFIDENTIAL

For use	e by APT inter	viewer only:			
Date o	of Interview: _		Locatio	n of Interview:	
Name	of Interviewe	r:			
Name	of Applicant:			(Bacidou)	
		First	MI	(Maiden)	Last
Preser	nt address: S			City	Zip
Home	Phone:			Business Phone:	
respon	ds to the follow				nsider how the volunteer listens and on related to the completed
SECTIO 1.	In what capa	acity do you wish to ention Team memb	•	ovider? (Mark all that	apply, e.g., camp counselor,
2.	How long have you lived in the area?				
3.	How long have you been attending or participating in a congregation in the area?				
4.	Which minis years?	try settings and co	onferences have yo	u been a member or vis	sitor of during the last five
5.		ren and youth fron			and sexual abuse, harassment
6.	Do you unde	erstand the necess	ity for this screenir	ng process?	
7.	Do you agre	ee not to cause any Yes	y intentional harm No	to vulnerable adults, ch	ildren and youth?

APPLICANT INTERVIEW

8.	Are you willing to report any known or suspected incidents, complaints and accusations of all acts, involving you or anyone else, of abuse, harassment, or molestation of any vulnerable adult, child or youth while attending or being involved in any Conference-related activity?					
9.	Yes No What other information do you have that you believe we should know in considering your application to serve as a care provider?					
	The interviewee shall be invited to respond to the following. The interviewer shall make notes of any that will be helpful in processing the application. Should the interviewee decline the opportunity to d, the interviewer shall note it appropriately.					
1.	Tell us about your faith journey. What does faith mean to you?					
2.	Leadership Skills: A. What experiences have you had in working with vulnerable adults, children or youth?					
	B. What skills and qualifications do you have?					
3.	Human Relations Skills: A. With what kinds of people do you work most easily?					
	B. How do you handle conflict?					
	C. How would you respond to an upset parent or guardian?					
	D. How do you handle criticism?					
	E. What kinds of discipline techniques would you use with disruptive or unresponsive care receiver(s) who deliberately defy your request for cooperation?					
	F. What situations cause you stress and how do you deal with these?					

APPLICANT INTERVIEW 2

H. How do you respond when someone disagrees with you?
4. Any final questions, comments, or information you would like us to know about yourself?
INTERVIEWER(S) COMMENTS: Personal comments and observations by the interviewer(s), especially how well the applicant communicated his/her thoughts, feelings, etc. Please include your intuitive assessment of the applicant's character and potential match with the respective ministry.
INTERVIEWER(S)
Names (Please Print)
Signature(s) Date
PLICANT INTERVIEW

G. When did you last lose your temper and why?

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