



2010 Adult Worker Application

SECTION 1 – PERSONAL INFORMATION – PLEASE PRINT

Chapter Name: _____ Chapter ID #: _____

DeMolay ID # _____ (If you are new to DeMolay you may not have an ID #)

My Mather's Center: _____

Male Female Date of Birth: _____

Social Security #: _____ Driver's Lic #: _____ State: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Home (): _____ (Work): _____ (Mobile): _____

E-mail: _____

SECTION 2 – STANDARDS OF SERVICE - READ CAREFULLY AND INITIAL EACH OF THE DEMOLAY SERVICE STANDARDS LISTED BELOW

I understand and agree to the DeMolay Adult Worker's Code of Ethics and to be bound by its provisions.

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This Form to be used:

- New Registration
- Renewal Registration
- Withdrawal
- Resignation

Chapter Position:

- Chairman
- Vice Chairman
- Adult Worker

Annual Fee Information:

- \$ 8 A fee (First registration)
- Already paid / another Chapter (Chapter #: _____)
- \$38 (ISC Member & \$10 paid with ISC membership fee)

I hereby certify that the information provided on this application is true and accurate. I agree to be bound by the DeMolay Adult Worker's Code of Ethics and to be bound by its provisions.

Signature: _____

Date: _____

Advisory Council Chairman Recommendation

Chairman Signature: _____

Date: _____

Executive Officer Approval

- I hereby certify that the information provided on this application is true and accurate. I agree to be bound by the DeMolay Adult Worker's Code of Ethics and to be bound by its provisions.
- CONTINUE AS / BECOME a DeMolay Adult Worker.

Signature: _____

Date: _____

SECTION 3 – PROFILE INFORMATION

Personal Profile

- 1. Marital Status and Name of Spouse, if applicable:
- 2. Present address for the last 5 years; length of stay at each address:
- 3. Have you ever been arrested as an Adult for any crime within 5 years? YES NO
If YES, please provide details:

Masonic Membership Profile

- 1. Please tell us about your Masonic Membership (If any)
 - Masonic Lodge Name & Number State
 - Senior Membership Name of Chapter Location
 - Scottish Rite York Rite Shrine Order of the Eastern Star

Employment Profile

- 5. What is your occupation?
- 6. Name & address of current employer?

Educational Profile

- 7. What are the name, location and dates of any graduate courses you attended?
- 8. What are the name, location and dates of any college or university you attended?

Driver's Profile

- 1. Have you ever been identified as a center of mass or a sex offender? YES NO (if YES include explanation)

- 9. Have you ever had your center of mass been identified as a sex offender within the last 10 years? YES NO
If YES, provide details:
- 10. As a sex offender, have you ever been in any of the following categories of sex offender within the last 5 years?
 - YES NO a. Involuntary, no aggravation
 - YES NO b. Involuntary, mandatory within 5 years
 If YES, provide details:
- 11. Have you ever been charged, arrested or received any criminal justice influence of a controlled drug, substance, possession, carrying, or holding no arms? YES NO
If YES, provide details:
- 12. Have you ever been accused, arrested, charged, or convicted of any violent crime? YES NO
If YES, provide details:

2. Information on a consumer report shall be obtained from the following sources: criminal records, education, employment, and driver licenses may be obtained. In connection with the request for information, the sponsor shall provide the following information: the name of the person being investigated, the address of the person being investigated, the date of birth of the person being investigated, the date of the investigation, the name of the agency conducting the investigation, and the name of the person conducting the investigation. The sponsor shall also provide any other information that may be relevant to the investigation.

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In signing this form, the sponsor certifies that the information provided is true, correct, and accurate. The sponsor shall also provide any other information that may be relevant to the investigation.

SECTION 4 – CERTIFICATION

Sponsor's Certification Failure to Obtain Required Signatures May Result in Delays with your registration

Being a sponsor may be a stressful and time-consuming process. Failure to obtain required signatures may result in delays with your registration. The sponsor shall provide the following information: the name of the person being investigated, the address of the person being investigated, the date of birth of the person being investigated, the date of the investigation, the name of the agency conducting the investigation, and the name of the person conducting the investigation. The sponsor shall also provide any other information that may be relevant to the investigation.

Sponsor Body Name:

Address:

City, State:

Sponsor's Signature:

Date: