

# **Lutheran Urban Ministry Corporation (LUM)**

## **Volunteer Approval Form: Checklist (Attachment E)**

**Applicants Name:** \_\_\_\_\_

**Orientation Session Held for Policy 2 Protection of Vulnerable Persons:**

**Date Completed:** \_\_\_\_\_

**Volunteer Application Form (Attachment A)**

- Completed and signed

**Volunteer Interview Form (Attachment B)**

- Completed and Signed

**Volunteer References Verification Form (Attachment C) – Completed and Signed**

**Volunteer Reference Verification Script (Attachment D)**

- Written notes are included

**The following records checks have been completed:**

- **Police Records check completed: Date**\_\_\_\_\_
- **Child Abuse Registry check completed: Date**\_\_\_\_\_

**The applicant is approved to serve at LUM.**

**Signature of Ministry Manager:** \_\_\_\_\_

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

**Signature of Board Chairperson**\_\_\_\_\_

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

**Date approved at Board of Directors Meeting:** \_\_\_\_\_