*VERY IMPORTANT, PLEASE READ CAREFULLY!

Background Checks

It is a policy of the Archdiocese of Chicago that every adult must complete an on-line background check as well as a DCFS/CANTS background check. An adult is someone 18 years of age or older, including students.

All forms need to completed. The DCFS/CANTS should be attached. If not, please call the Respect Life Office to request the latest copy. On-line volunteer Background Check instructions are detailed below:

1. On-line Volunteer Background Check (eAppsDB): Many of you have already completed this process (as it is a requirement for any person volunteering/working/etc for the Archdiocese). If you have gone on the March for Life Pilgrimage with us in the past you should be cleared, however, you still need to let me know so I can verify. **I must verify that everyone is cleared**. If you have not attended in the past, please complete the on-line background check and then let me know so I can verify submission and approval. The form attached and titled, eAppsDB Instructions for Volunteers, walks you through the process. If you are from another Diocese you may send in proof of a background check from your parish as a substitute for the online background check.

2. Illinois Department of Children and Family Services Background Check: <u>EVERYONE</u> must complete this form, even if you have gone on the March for Life in the past. This form is extremely time sensitive because we must send these to DCFS in Springfield, IL and hear back from them before we confirm final numbers with the hotel. Therefore, we need this form to be printed out and mailed or faxed with the packet no **later than December 4**. <u>This is a requirement even if you did it last year</u>. <u>The DCFS/CANTS form should not be altered in any way. It must be filled out completely and signed/dated before turning in.</u> The form is the very last page of this document. If somehow the DCFS/CANTS form is not attached to this packet, please call the Respect Life Office at 312-534-5355 and request for the form.

This information must be submitted ASAP. It takes time to run both checks and we don't want to disqualify attendees because their checks are not complete!

*For those coming from outside the Archdiocese of Chicago, you must submit a certificate from your diocese verifying that you have passed the required background checks, or complete the online background check following the detailed instructions.

Group leaders please pass along this sheet and the proper forms to all of your chaperones and anyone over 18 years of age.

As always, please feel free to call me with questions.

Thanks!

Raymund Pingoy
Coordinator of Youth Outreach
office: 312.534.8294   fax: 312-534-1554

eAppsDB Instructions for Volunteers

Log on to the Archdiocese website at www.archchicago.org to access eAppsDB.
- At the Archdiocese website, go to the section labeled "Protecting Children".
- Click on the "Background Checks" link in that section. This will take you to the eAppsDB login page for the Archdiocese of Chicago.
- At the 'Login Page' of eAppsDB, you will first need to register for an account. To do so, click on the underlined 'click here' in the phrase 'If you do not have a user id and password, please click here to register' located at the top of the page.

You should now be at the 'New User Registration' screen.
- All fields on this screen require entry except email address.
- In the 'Primary Site' field, select the diocesan entity for which you are volunteering (since you are going on the trip with the Respect Life Office and we are part of the pastoral center you will select pastoral center). Do this by clicking on the button that says "Open the Site Search" enter Pastoral Center into search box and press enter, next click on the select button next to "Pastoral Center and Related Agencies
- **The 'Access Code' field requires entry of a code provided by the Archdiocese of Chicago.**
The access code is set as 'protection'.
- A choice for 'type of application' is required – click on the 'volunteer' button.
- In the 'User ID' field, you should enter a user ID that you would like to use for access to your application. Please read the requirements for user ID at the bottom of the registration screen.
- In the 'Password' field, you should enter a password that you would like to use for access to your application. Please read the requirements for password at the bottom of the registration screen. You are prompted to enter your password twice for verification purposes.
- In the 'First Name' and 'Last Name' fields, please enter your name as it appears on your driver's license.
- In the 'Date of Birth' field, please enter your DOB in mm/dd/yyyy format. You are prompted to enter your DOB twice for verification purposes.

- ✓ **Please write down your user ID and password in order to access your application at a later time. Store this information in a safe place for future use.**

Once you have completed the requested information, click the 'Register' button.

You should receive a message indicating that you have been successfully registered in the system. To continue with the application process, click the link that says: 'Please click here to login and continue your application'. This will take you to the 'Login Page' screen.
- At the 'Login Page' enter your user ID and password in the areas provided and click 'Login' to continue.
- After successfully logging in to eAppsDB, you will be taken to the 'Application Overview' screen for your application.

An * by a field indicates that entry is required in the field. Required fields must be completed before information will be accepted and saved.

*****(more instructions on the back)*****

The 'Application Overview' screen provides the following information:

- The status of your application.
- A list of application forms required by your organization to be completed.
- The option to view or submit your application.

A red 'X' located by each application form indicates that the form has not been completed. To fill out the forms, click on the form name in the list on the right hand side of the screen. After completing requested information in each section, click 'Save'. A green check mark will appear by the forms that have been successfully completed on the Application Overview page. After all forms have been successfully completed, the 'Submit Application' button will be activated and you will be able to submit your application.

To get started, click on the 'Main Application' form.

Here are a few tips for filling out the application:

- In the Main application section please put your full legal name as it appears on your driver's license (first, middle, last). *Do not enter prefixes in the first name field (Example: 'Mr', 'Dr', 'Sister', etc.). Only enter suffixes in the suffix field (Example: 'Sr', 'Jr', 'III', etc.).*
- There are two fields for last name. The last name entered in the last name field will be used as the alphabetizing last name. If you have a hyphenated last name, enter it entirely in the last name field (Example: Smith-Johnson). The area for 'second last name' should only be used if necessary (Example: David Garcia Hernandez. In this case, Garcia will be the alphabetizing last name and Hernandez will be listed in the second last name field

In the 'Archdiocese of Chicago Questionnaire':
- Primary Parish/School/Agency that you are applying or currently hold a position for (select from drop down box) and start date. For Agency you can put Respect Life
- Position you are applying or currently hold (write in) volunteer for March for Life Pilgrimage

The 'References' form requires:
- 1 Professional and 3 Personal references (name [first and last name], city, state, country, daytime phone and how long have you known this person)
  - Note: A Professional reference is a reference from a Supervisor who you have worked for in a professional and/or volunteer capacity. A Personal reference is a reference from a friend, co-worker (including volunteer activities) and/or family member.

When you have completed all sections, you may 'submit' your application. Click on the 'Submit Application' button and follow the screen instructions along the way. When the submission of your application has been completed successfully you will receive the following confirmation message, 'You have successfully submitted the application. Thank you!'

If questions should arise during your application process, please click on 'HELP' in the top left hand corner of the screen in which you are currently working. You will be taken to the HELP screen information for that section. If you should have questions or need assistance, please contact our office at <u>support@eappsdb.com</u> or phone 312/ 231-1238, ext. 305.

Illinois Department of Children and Family Services

AUTHORIZATION FOR BACKGROUND CHECK
Child Abuse and Neglect Tracking System (CANTS)

For Programs NOT Licensed by DCFS
NOTE: **Do not use this form if you are an applicant for licensure or an employee/volunteer of a licensed child care facility. Please contact your licensing representative.**

Name: _____
              Last   **First**   **Middle**

Date of Birth: _____   **Gender (circle): Male   Female**   **Race: _____**

Current Address: _____
                       Street/Apt.

City: _____ State: _____ Zipcode: _____

Parish/School/Agency: _____

Your Position (Circle One): Priest   Deacon   Religious Order   Lay Employee   Volunteer

List all addresses at which you have resided in the past five years:

_____

_____

_____

_____

List maiden name and/or all other names by which you have been known: (last, first, middle)

_____

_____

_____

_____

I hereby authorize the Illinois Department of Children and Family Services to conduct a search of the Child Abuse and Neglect Tracking system (CANTS) to determine whether I have been a perpetrator of an indicated incident of child abuse and/or neglect or involved in a pending investigation. I further consent to the release of this information to the agency listed below.

_____
           Signature   **Date**

Archdiocese of Chicago   **(Agency Name)**
Jan Slattery   **(Contact Person)**
835 N Rush St.   **(Address)**
Chicago, IL 60611   **(City/State/Zip)**

Mail this request to:
Department of Children and Family Services
406 E. Monroe – Station #30
Springfield, IL 62701
DCFS