

Chaperone Application

1. Printed name: _____ Date of application: _____

Complete address: _____

Day phone: _____ Cell Phone: _____

Name/address of employment: _____

_____ Title or position: _____

2. List all crimes ever arrested/charged with and state final disposition of case:

Age	Crime	Legal Disposition (Ex: punishment received)

3. List all marriages, including name of spouses, age of both parties at marriage, length of marriage, and and state why marriage ended (use separate sheet, if necessary)

4. Have you ever participated in any form of counseling/therapy/mental health service? If so, please list when this occurred, what type of services you received, how long you received the services, and why the services were terminated. You will also need to complete a special Consent to Release Confidential Services/Request for Records form, so information that may be pertinent to the issues of chaperoning a sex offender may be gather and inspected.

5. What is your relationship to the offender? _____

6. How long have you know the offender? _____

7. What have you been told about the offender's crime(s)? _____

8. Do you believe the offender is guilty of the crime(s) in question? _____

9. How do you feel about the offender's crime? _____

10. Have you ever been the victim of a sexual or other crime? _____ if yes, please explain what happened when it occurred.

11. Have you ever been accused of committing a sexual crime or otherwise inappropriate behavior against another person? _____ If yes, please explain what happened and when this occurred.

12. Please fully describe your alcohol/drug history, beginning with your age the first time you ever used any alcohol or drugs, how much you consumed at the highest point of consumption, and your current usage. Please advise when you last drank any non-prescription drug.

13. Please explain why you want to be a chaperone for this offender? _____

14. Please explain what you feel your special strengths are that will enable you to be an appropriate chaperone? _____

15. Please explain what you feel your weaknesses or vulnerabilities are that would enable the offender to manipulate you or prevent you from being a strong chaperone?

I hereby attest that the above statements are true and correct, to the best of my ability. I understand that the information I provide may be verified. I understand that, if I have deliberately made false and misleading statements, I will be immediately disqualified as a chaperone-in-training.

Signature

Date of Application