

**Mid-America TEC Team
Request to Serve Application
Teens and Adults**

Date: _____

Please read ALL of the following information before filling out the application

It is expected that the applicant filling out a team application, be actively practicing their faith and honestly answers these questions. If the information is misleading, the application will be invalid.

It is recommended that NO ONE should serve on more than two (2) TECs in a twelve-month period, except in the case of an emergency. If you apply to serve on two TECs within a twelve-month period there should be at least one (1) TEC between them. You must **completely** fill out the application. Also, **the reference form must be returned before your application will be placed on file.** Please give the attached reference form and an envelope stamped and addressed to the TEC office to your parish priest or an adult who is active within the TEC program. The application and reference form will be kept on file for one (1) year or until you serve on a team. After one (1) year or after you serve on a TEC team you will need to submit another **Request to Serve** application in order to serve on a future team.

The TEC Council reminds you that offering to serve our Lord through a TEC team is your commitment to the candidates and the other team members of that TEC weekend. This commitment means attending **ALL** of the team meetings, having your meditation ready to be critiqued if and when a meditation is assigned to you, to attend your weekend reunion, to attend the Hoot on the next TEC weekend that follows yours, and to keep active within the TEC program by doing wheat and sending wheat letters especially if you wish to serve on future weekends. If you encounter difficulties with any of these commitments- for the sake of the candidates and other team members- please let the Director(s) know as soon as possible.

Consult the Mid America TEC web site **www.midamericathec.com** for upcoming TEC dates and locations.

I would like to serve on TEC(s) _____ and cannot serve on _____.

Name: _____ Gender: M F Date of Birth: ___/___/___

Address: _____

City/State/Zip: _____

Phone Number: _____

E-Mail Address: _____ Marital Status S M D Other

College Address: _____

College Phone Number: _____

Parish/Church: _____ Are you registered? Y N

Parish Address: _____ Phone Number: _____

List the numbers or dates of the weekends you have attended or served and in what capacity or any meditations given. (Start with the most recent):



Model Code of Pastoral Conduct

**For Priests, Deacons, Pastoral Ministers,
Administrators, Staff, and Volunteers**

Volunteer's Code of Conduct

Our children are the most important gifts God has entrusted to us. As a volunteer, I promise to strictly follow the rules and guidelines in the Volunteer's Code of Conduct as a condition of my providing services to the children and youth of our [parish, school, facility, diocese, etc.]

As a volunteer, I will:

- Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration.
- Avoid situations where I am alone with children and/or youth at Church activities.
- Use Positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.
- Refuse to accept expensive gifts from children and/or youth without prior written approval from the parents or guardian and the pastor or administrator.
- Cooperate fully in any investigation of abuse of children and/or youth.

As a volunteer, I will not:

- Smoke or use tobacco products in the presence of children and/or youth.
- Use, possess, or be under the influence of alcohol at any time while volunteering.
- Use, possess, or be under the influence of illegal drugs at any time.
- Pose any health risk to children and/or youth (i.e., no fevers or other contagious situations).
- Strike, spank, shake, or slap children and/or youth.

I understand that as a volunteer working with children and/or youth, I am subject to a thorough background check including criminal history. I understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in my removal as a volunteer with children and/or youth.

Volunteer's Printed Name

Volunteer's Signature

Date

Diocese of Jefferson City
Safe Environment Program
Background Check Acknowledgement Form

Name (please print): _____

Address: _____

Phone: _____

Social Security Number: _____

Birth Date (month, day, year): _____

Please check the description of your service: Volunteer

Employee

My service/job/ministry is: VOLUNTEER TEAM MEMBER ON A MID-AMERICA TEC WEEKEND

The information listed above is true and correct. I understand that it will be treated as confidential as required by law. I understand that the information will be used for a routine background check in keeping with the *Safe Environment Program* of the Diocese of Jefferson City.

Signature: _____

Date: _____

Reference Form

Dear Friend,

The person who has given you this form has applied to be a team member on a Mid America TEC weekend in the Jefferson City Diocese.

TEC is an experience in Christian living, which has been designed especially for young people. It is an international program that has been in existence since 1965 and has been in our Diocese since 1977.

It is based on solid and up-to-date theological and psychological principles. The testimony of thousands of young people who have participated in the program gives ample and convincing evidence that the program touches the participants quite deeply and has a most positive influence on their lives.

In order for the Director(s) to wisely choose the team, we ask that you fill out the reference form on the other side of this letter. Your comments, of course, will be kept in the strictest confidence.

We ask that you pray for this person so that he/she may be a positive influence in the TEC movement.

If you have any questions or desire to know more about TEC, please feel free to contact us at (573) 635-5717 or by using email through the Mid America TEC web site: www.midamericathec.com. Thank you very much for your help.

Yours in Christ,

Steve Maxwell
Lay Director, Mid-America TEC

P.S. Please return this form (in the stamped envelope supplied by the team applicant):

Mid-America TEC
1206 E. McCarty
Jefferson City, MO 65101

Please send in the attached reference form as soon as possible, the person who gave this to you will not be considered for the weekend until we receive it. Thank You.

DO NOT return the form to the person applying to serve on TEC.

TEC TEAM REFERENCE FORM

NAME OF PERSON APPLYING FOR TEC TEAM _____

ADDRESS _____ CITY _____ STATE ____ ZIP _____

TEC NUMBER BEING APPLIED FOR: TEC # _____ DATE OF TEC _____

PLEASE CIRCLE THE APPROPRIATE DESCRIPTION OF THIS PERSON AND COMMENT AS DESIRED OR AS IS NECESSARY. YOU MAY CIRCLE MORE THAN ONE ITEM.

1. MY ACQUAINTANCE WITH THIS PERSON: Distant - Average - Close

2. MY RELATIONSHIP TO THIS PERSON IS:
Teacher/Student - Family - Friend - Employer/Employee
Counselor - Priest/Parishioner - CCD Teacher/Student
Other _____

3. AREAS OF LEADERSHIP:
Social - Parish - Community - Youth Group - Prayer Group
Other _____

4. MATURITY: Very Mature - Mature - Average - Immature

5. PSYCHOLOGICAL ADJUSTMENT:
Poorly Adjusted - Somewhat Adjusted - Average - Very Well Adjusted
Are there any problems of which you are aware?

6. RELATIONSHIP TO PEERS:
Loner - Very Quiet - Disliked - Average
Well Liked - Highly Respected - Domineering

7. RELATIONSHIP TO HIS/HER FAMILY:
(Please use your own judgment. Reply in a comment.)

8. ATTITUDE TOWARD RELIGION:
Antagonistic - Indifferent - Confused - Positive - Enthusiastic
Over Pious - Don't Know - Other _____

9. RELATIONSHIP IN A DISCUSSION GROUP:
Quiet - Average Participant - Very Talkative - Domineering
Fair Discussion Leader - Good Discussion Leader

PLEASE make any comments which would help the TEC Director(s) understand how this individual would make an effective team member on a Mid America TEC weekend.

NAME OF ADULT FILLING OUT THIS FORM: _____

HOW LONG HAVE YOU KNOWN THIS PERSON? _____ YOUR PHONE # _____