
 Organization Name _____

Background Screening Checklist

Guiding Principle: All employees, regardless of position, and most volunteers should be screened.

	Yes	Needs Attention
1. Do you have a written policy that addresses screening of employees and volunteers?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you consulted an attorney in the development of a background check policy and screening procedures?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you ask volunteers to wait until they are associated with your ministry for at least six months before allowing them involvement with children of any age?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you conduct thorough background checks for all your employees, regardless of position?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you conduct thorough background checks on volunteers, especially those who work with children, youth, or vulnerable adults, those on your security/medical teams, and those who handle money or other confidential records?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your screening include a written application and personal interview?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your screening process include a criminal background check?	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you request at least two references from all applicants?	<input type="checkbox"/>	<input type="checkbox"/>
9. Do you contact at least two references provided by applicants?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you require applicants to sign a liability release that grants consent for references to share information about the applicants?	<input type="checkbox"/>	<input type="checkbox"/>
11. Do you update criminal background checks for employees and volunteers at least every three to five years?	<input type="checkbox"/>	<input type="checkbox"/>
12. Do you obtain written authorization from applicants before conducting a criminal background check?	<input type="checkbox"/>	<input type="checkbox"/>
13. Have you developed and implemented a plan to regularly communicate your screening policy to ministry attendees?	<input type="checkbox"/>	<input type="checkbox"/>
14. Do you regularly review your program and make changes when needed?	<input type="checkbox"/>	<input type="checkbox"/>

Notes: _____

Completed by: _____ Date: _____

This is a sample document only. Your organization is responsible for compliance with all applicable laws. Accordingly, this checklist should not be used or adopted by your organization without first being reviewed and approved by an attorney. Brotherhood Mutual assumes no liability in preparation and distribution of this checklist. ©2020 Brotherhood Mutual Insurance Company. All rights reserved.