

**2010**  
**SAFE SANCTUARY CERTIFICATION CHECKLIST**

DATE \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_

**PLEASE CHECK THE APPROPRIATE BOX!!!!!!**

APPLICATION COMPLETED----- YES \_\_\_\_\_ NO \_\_\_\_\_

REFERENCES CHECKED----- YES \_\_\_\_\_ NO \_\_\_\_\_

CRIMINAL HISTORY CHECKED----- YES \_\_\_\_\_ NO \_\_\_\_\_

SAFE SANCTUARY TRAINING----- YES \_\_\_\_\_ NO \_\_\_\_\_

APPLICANT RECOMMENDED FOR CERTIFICATION--YES \_\_\_\_\_ NO \_\_\_\_\_

**RE-CERTIFICATION ONLY REQUIRES CRIMINAL BACKGROUND CHECK**

PASTOR, DISTRICT / CONFERENCE EVENT LEADER, AUTHORIZED LOCAL CHURCH DESIGNEE OR SAFE SANCTUARY CERTIFICATION AUTHORITY MAKING RECOMMENDATION.

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

CHURCH \_\_\_\_\_

DISTRICT \_\_\_\_\_

**"PLEASE ATTACH A LIST OF ALL APPLICANTS BEING RECOMMENDED FOR CERTIFICATION THAT HAVE COMPLETED THE ABOVE PROCESS."**

**SEND TO: SAFE SANCTUARY CERTIFICATION AUTHORITY  
ATTENTION: DAN RAMSEY  
5215 MAIN STREET  
HOUSTON, TEXAS 77002**