

## DAC Protection Policy Re-Certification Confirmation Statement

I am returning my Application, Church History and Prior Volunteer Work, and Authorization-Personal Information forms to be re-certified to work with children, youth and vulnerable persons in the Detroit Conference of the United Methodist Church.

Three Reference Forms from persons who are not related to me and whom I have known for 6 months or more, (*Check appropriate box*) will be mailed separately  / are also enclosed .

I have read the most current Protection Policy statement and I agree that I will be in compliance with the policy.

**PLEASE USE INK, PRINT CLEARLY**

Print name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Return this form and your Re-certification application pages to:

The Protection Policy Committee

1309 N. Ballenger Hwy, Suite 1

Flint, MI 48504

Or fax documents to: 810-233-5700