

# MEDICAL GADETS GORPACKET 2025





MMSNEG/OUTLEON

# MEDIGAL GADETS GORP

# REGISTRATIONSTEPS



- 1. Have your MCC complete or renew Adventist Screening Verification (formerly Verified Volunteer) if needed.
- 2. Complete the MCC Registration & ASV Form and submit with a copy of the Compliance Report provided by the Church's Child protection officer. Email to: gteixeira@sneconline.org.
- 3.Once the MCC Registration & ASV Form is verified and approved you will receive an email with:
  - a. Welcome letter
  - b. Registration Packet
  - c. Link to pay the participant registration fee of \$15.
- 4. Payments can be issued with a credit/debit card or a check. Checks must be received in the office prior to the registration deadline to consider the application process complete.
- 5.Once payment is received you will receive and email with the Certificate of Operation and the Advent Source password.

For questions regarding Medical Cadets please contact Glorimar Teixeira

Email: gteixeira@sneconline.org.

# **Adventist Screening Verification**

Adventist Screening Verification (ASV) is the generic name for the NAD mandated background check and online training. The company providing this service currently is Sterling Volunteers (SV), and the former name of the program is Verified Volunteer.

The website is: www.nadadventist.org/asv

This will be the only website you need to remember going forward. Each person will create their own account. Once the user is on the website, they must select: 1) the Atlantic Union, 2) the Southern New England Conference, and then 3) their church name to begin the registration process. Even though this is done every three years, the system does a monthly check to make sure names are still cleared. Doing this is one way to help keep children safe.

ALL adults, <u>anyone 18 or older</u>, are required to complete both the online training and clear the background check BEFORE ever serving as a volunteer in your local Club or attending an event as staff or volunteer.

NOTE: Please pay careful attention to the spelling of your name and the birth date that you enter. All staff names and birth dates must be identical.

<u>Level 2 Administrator</u> - Each church location is supposed to have a Level 2 Administrator (Child Protection Officer) over the Adventist Screening Verification (ASV) program that can view the list of volunteers for their Church and keep track of the information. They can see who has cleared the background screening and remind people when they need to redo the program.

NOTICE: every staff member must have completed their Adventist Screening Verification and be cleared to be staff and to attend any SNEC event.

Any volunteers staying overnight at an event must have completed their Adventist Screening Verification and be cleared to register and attend any SNEC event.

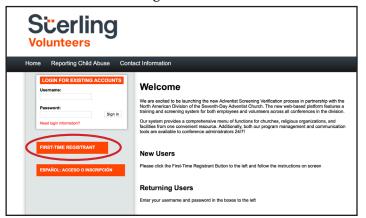
#### **Adventist Screening Verification - Cleared/Eligible**

- 1. Complete online training
- 2. Pass Background check to be Eligible
- 3. Submit a copy of the Compliance report with the Club Registration Form

For questions regarding ASV, please contact April Montoya-Gonzalez at amontoya@sneconline.org

## Sterling Volunteer Registration

Visit www.ncsrisk.org/adventist



2. Select your State from the menu.



3. Select Southern New England Conference from the drop down menu.



4. Create a user name and password.



5. Enter personal information



6. Select Southern New England Conference for primary location in the drop down menu.



7. Select the roles you currently perform. Select all that apply including Pathfinder & Driver (Volunteer).\*



8. Begin training session (approximately I hour).

\*Background check will be required for this role.

## Southern New England Conference of the Seventh-day Adventists Adventist Youth Ministries Department



Corp Registration & Adventist Screening Verification Form 20\_\_\_\_ - 20\_\_\_\_

Church Name: Group/Club Name:		
Elected Director's Name:	Email:	
Mailing Address:		
Phone Number: <mark>Submit this form to the office along with t</mark> he list of regis	Home Cell stered MCC Keep a copy for you	Work <mark>ur records</mark> .
REQUIREMENTS:  • All staff and volunteers must have completed the Adventist Scr Administrator • Your local church board must approve all meetings, activities, ex Email form to:gteixeira@sneconline.org. • Large clubs may submit multiple pages • Mail to: Adventist Youth Ministries Southern New England Con Fax: (978) 365-3838  Date Received:	vents, outings, etc., for insurances purposes.  Inference PO Box 1169 So. Lancaster, MA 0156	61 or
Please list all Adult Staff /Volunteers for the Season	Date Processed:Child Protection Course	Background Check
	Expiration date	Expiration Date
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Church Board Signatures:	_	
By Signing this form, we acknowledge that all names listed above are members i Verification and are eligible to serve.	in regular standing, have completed the require	ements of Adventist Screening
Church Pastor or Head Elder If No pastor:	Church Clerk:	
Child Protection Coordinator:	Treasurer:	·

## Southern New England Conference of the Seventh-day Adventists Adventist Youth Ministries Department



List of Registered MCC 20\_\_\_\_ - 20\_\_\_\_

Church Name:	Corp Name:	
Elected Director's Name:	Email:	
Mailing Address:		
Phone Number:	Home Cell Work	-
Please send this form to the office along with	h the registration & ASV form. Keep a copy for $y$	our records
Please list all enrolled MCC for the Season	Child Protection Course Backgr Expiration date ration	round Check Exp Date
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