

Branson PM MOPS Kids Staff Expectations

Please keep this page for your reference.

Thank you for joining us in MOPS Kids this year! We are excited to see how God can use you to capture kids' hearts with truth and show them the love of Jesus. We are striving for excellence in all things and consistency for the kids, as much as possible. To that end, we expect the following guidelines to be followed by all of our workers:

1. **Be on time.** MOPS meetings run from 6:00-8:30pm. We need all of our MOPS Kids staff in the Kid City lobby by 5:30pm each meeting. Childcare check-in begins at 5:45. All moms, kids, and staff need to be out of the building by 9:00pm.
2. **Be ready to serve.** We will have lessons, snacks and crafts planned each meeting to keep the kids engaged and entertained while learning about God and His love for them. We want kids to enjoy their time so please interact and love on them as well as watch them play. Please do not bring your own children with you when you serve with PM MOPS Kids. We ask that you keep your cell phones put away at all times while working for PM MOPS Kids unless there is an emergency.
3. **Be flexible.** We are striving for consistency in classrooms as much as possible, but due to staff availability or class sizes, we may need to shift you around to other age groups.
4. **Be aware.** It is crucially important that we keep a safe environment and that you are never alone one-on-one with a child. Please speak up if you feel something is not right.
5. **Be in contact.** We have to know how many workers are available. We will be texting you one week before the meeting. Please respond. And if you commit, please show up.

The minimum age for our childcare workers is 14.

THE MOPS KIDS WORKER PAY SCALE:

For each PM MOPS meeting that you work, you will receive the base pay of \$30.

If you work for PM MOPS for one year (Sept-May), and you return for a second year, you will receive an additional \$5 per meeting. This will continue each year until you reach the cap of \$40 per meeting.

BRANSON PM MOPS 2023-2024 MEETING DATES:

September 12	December 12	March 12
October 10	January 9	April 9
November 7	February 13	May 14

Mark these on your calendar. Your attendance is important!

CONTACT:

Melanie Hebblethwaite, MOPS Kids Coordinator – (417) 464-8558

Jessica Bolerjack, Branson PM MOPS Coordinator – (417) 522-3317

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Meeting Procedures

Arrival

- ▶ Classrooms are divided by age. Please look over the tub that goes with that classroom and familiarize yourself with the lesson/craft before the kids arrive.
- ▶ Wear your MOPS Kids Staff name tag on your upper body so that moms know you are supposed to be there, and feel safe leaving their kids with you.

Check In/Check Out

- ▶ As kids are dropped off, write down their name on the classroom sign in sheet. If a mom mentions any concerns or needs, write them down on that sheet.
- ▶ After all of the kids are checked in, we will bring a master list of the kids for each room. Go through the list and make sure each child in your room is supposed to be there, and make sure that you don't have any extras. This will be essential to checking kids out at the end of the night.
- ▶ As kids are being checked out, one worker needs to stand by the door with the master list and a highlighter. Ask for the name tag, and be sure to mark the name with the highlighter, then let the child leave with their mom. Make sure they take all belongings with them.

Classroom Time

- ▶ There must be at least 2 workers in a classroom at all times. Larger classes may require 3 workers. We follow the Missouri daycare ratios for all classes.
- ▶ There will be a designated leader in each room in charge of directing the lesson, craft, snack, and check-out procedures.
- ▶ First Aid kits are available in each classroom tub. Always wear gloves if dealing with blood or body fluids. Use wipes to thoroughly sanitize any effected areas or surfaces.
- ▶ Snack time is a favorite time for most kids, so you don't want to skip this part! Please use hand sanitizer and gloves when passing out snacks and have the kids either wash their hands in the classroom bathroom or use hand sanitizer.
- ▶ Kids with allergies should have them listed on their tag, and may have a special snack provided by parent. Please be careful to be aware of this. We will keep snacks nut-free and simple to help with this.
- ▶ Kids cry and because this is past a lot of their bedtime, we expect this to happen. Let a child cry for no longer than 10 minutes and try any techniques you can think of to calm them: rocking, walking, bubbles, snack or drink, ****check for dirty or wet diaper****, etc... If child cannot be calmed after 10 minutes, reach out to the MOPS Kids Coordinator and she will text or go get the child's mom.
- ▶ Please use gloves when changing any dirty or wet diapers. This helps germs stay with the person that made them! Put any dirty or wet diapers in a plastic bag and tie it. Place it in the trash can closest to the changing table.

Clean Up

- ▶ Meetings end at 8:30 pm. Start cleaning up at 8:15. Wipe down all tables and chairs used. Take the trash out, and set the bag in the hallway, then replace the liner in the trash can. FBC Learning Center uses these classrooms daily so we want the classrooms to be ready for the next day. Do not move toys or other equipment from room to room. Please leave the room better than you found it.
- ▶ Look around the classroom to ensure no items are left behind. Put all of the MOPS Kids supplies back into the tub and bring it to the registration area. The MOPS Kids Coordinator will give you your check. Thank you!!

Branson PM MOPS Kids Application

Please return to MOPS Kids Leader

We love MOPS Kids! Our goal is to create a safe, nurturing environment for all children. We will engage with stories, songs, and age appropriate play. Thank you for your interest in investing in the lives of moms by helping care for their MOPS Kids. Your answers to these questions will be kept in strict confident.

Submit applications via mail, email, or in person to Branson PM MOPS, c/o Jessica. Contact details listed below.

Name:	
Street Address:	
City, State, Zip:	
Cell #:	Other #:
Birthday:	Email:

Why do you want to serve in the Branson PM MOPS Kids ministry?

Tell us about other experience, education, or previous work with children that may have prepared you for this job.

Have you been trained or certified in CPR? If yes, when?

Please explain any physical limitations and personal situations that would impact your work with this program.

Do you regularly attend a church? If yes, where?

How would you describe your relationship with Jesus?

Which age group do you prefer to work with?

<input type="checkbox"/>	Infants: 0-12 Months	<input type="checkbox"/>	Kids: 3-4 Years
<input type="checkbox"/>	Infants: 12-18 Months	<input type="checkbox"/>	Big Kids: 5 Years +
<input type="checkbox"/>	Toddlers: 18-24 Months	<input type="checkbox"/>	No Preference
<input type="checkbox"/>	Toddlers: 2-3 Years		

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Please return to MOPS Kids Leader

	Reference 1	Reference 2	Reference 3
Name			
Phone			
Email			
Relationship			

While it is not our intention to unnecessarily pry into your personal life, we are legally responsible to ask some questions concerning your background. Your responses will be held in the strictest of confidence and may be verified through an independent background check.

Have you ever been convicted of a crime other than a minor traffic offense? Yes No If yes, please state the nature of the conviction, date, sentence received, sentence served (including dates and locations), probation of parole officer's name and contact information, and any other facts or circumstances you can provide.

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?
 Yes No If yes, please explain.

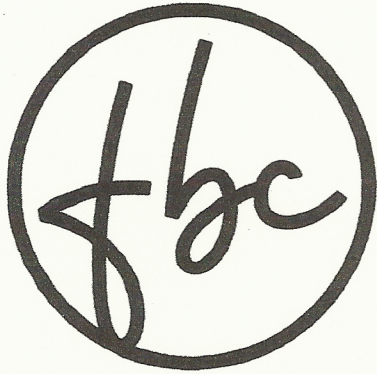
Are you willing to be fingerprinted? Yes No

By signing here, I acknowledge that I have read and agree to comply with all of the Branson PM MOPS Staff expectations and procedures.

Applicant Signature: _____ Date: _____

Please note: Acceptance of this application does not constitute a contract of employment and is not a commitment of any kind to the applicant.

For PM MOPS Leadership Use	Date Received:		
Date References Checked:	#1	#2	#3



First Baptist Church Branson Background Check/Release Form

Name _____
(first) (middle) (last)

Previous names, if applicable (maiden, alias, etc.) _____

Social Security # _____ Date of Birth (include year) _____

Email Address _____

Permanent Address _____
House/Apt # Street City State Zip Code

→ Please use physical address only; PO boxes are unacceptable. Temporary residents (such as C of O or KI students) please give home address.

Ministry/Department you're requesting to serve at FBC _____

FBC staff/department contact person _____

Consent for Background Check:

I, the undersigned, hereby give permission for First Baptist Church, Branson to obtain information relating to my Criminal History Record. The Criminal History Record, as received from the reporting agencies, may include arrest and conviction data, as well as plea bargains and deferred adjunction. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the Criminal History Record check may be repeated at any time. I understand that I will have an opportunity to review my Criminal History Record if requested and a procedure is available for clarification, if I dispute the record as received.

I, the undersigned, do, for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify the search company and First Baptist Church, Branson, and each of their officers, directors, employees and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever, and any and all related attorney's fees, court costs, and other expenses resulting with my application to become a volunteer/staff member.

Signature _____ Date _____

If applicant is under 18, Print Parent Name _____

Parent Signature (if applicant is under 18) _____