Alateen Needs Meeting Sponsors

Do you have the following:

 At least 2 years in Al-Anon.
 A sponsor.
 Active knowledge of Al-Anon 12 Steps.
 A desire to help children at risk due to exposure to alcoholism/addiction.

Please consider supporting teens and children with the same love, strength and hope that we have gained in our own Al-Anon meetings. It will take one hour a week to make an indelible mark in the lives of our youth who truly need our help.

Contact District 3 Alateen Coordinator: idahoD3alateen@gmail.com

AMIAS Candidate Form & Questionnaire

Idaho Area 13 Requirements for Al-Anon Members Involved in Alateen Service (AMIAS)

Note: If you are receiving these forms, it is because you have requested to become an AMIAS.

Dear Al-Anon District Member,

Thank you for your interest in becoming an AMIAS! To become an AMIAS, you must first be approved by your District Alateen Coordinator and then Certified by Area 13.

Definitions:

- AMIAS "Al-Anon Member Involved in Alateen Service."
- AAPP "Area Alateen Process Person"

The Process:

- The first step to become an AMIAS is to contact your District Alateen Coordinator.
 - o District 3
 - Tami Osterday
 - idahoD3alateen@gmail.com
 - o All others
 - We currently do not have an Alateen Coordinator in any other District
- The District Alateen Coordinator will forward the "AMIAS Candidate Form and Questionnaire" to you.
- You need to complete the Form and Questionnaire and return them to your District Alateen Coordinator.
- The District Alateen Coordinator will
 - Review the Form and Questionnaire
 - Verify that no answers are "False" on Questionnaire
 - Ensure the Candidate has at least two years in Al-Anon
 - Contact your Sponsor and ensure the Candidate has worked Steps
 1, 2 and 3 with their Sponsor
 - Contact Al-Anon References to ensure you can become an AMIAS
 - Sign the Documents if appropriate
 - \circ Send the approved forms to the AAPP
- The AAPP will send you an envelope with two packets.
- The instructions and return envelopes will be included.

Thank you for your interest in becoming an AMIAS!

Signature _____

AMIAS Candidate Form & Questionnaire

Area 13 Requirements for Al-Anon Members Involved in Alateen Service (AMIAS)

Full Name

Last:	First:	Middle:	Suffix:

Mailing Address

Street:		
City:	State:	ZIP:

Telephone

Cell:	Home:
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Email

Email:		

Al-Anon Information

District:	Home Group:	Years in Al-Anon:

Sponsor

Name:	
Email:	Phone:

References (Please list two - non-related and in Al-Anon)

Name:	
Email:	Phone:

Name:	
Email:	Phone:

The following questions are required to ensure all World Service Office and Idaho Area 13 Requirements for Al-Anon Members Involved in Alateen Service (AMIAS) are met. Please check TRUE or FALSE for each question and then initial it. I understand any information obtained will be securely stored.

***If any of the answers are False, STOP and contact the AAPP before proceeding.

QUESTIONS	True	False	Initials
I am at least 21 years old.			
I have been active in Al-Anon for at least the last 2 years, in addition to any time			
spent in Alateen.			
I attend at least one Al-Anon meeting a week.			
I have a Sponsor and have worked Steps 1, 2, and 3 with my Sponsor.			
I have not been charged with, plead guilty to, or been convicted of a felony.			
Nor have I been charged with, plead guilty to, or been convicted of child			
abuse, child endangerment, injury to a child – misdemeanor or felony			
offense, domestic violence, or any other inappropriate sexual behavior			
whether it was a withheld judgment or not. And, I have not demonstrated			
emotional problems which could result in harm to Alateen members.			
I have not been charged with a DUI in the past year. I have not been convicted of a			
DUI in the past 3 years.			
I agree not to have overt or covert sexual interaction (whether consensual or not)			
with an Alateen member, including but not limited to 1) touching a teen			
inappropriately, 2) dating a teen who is an Alateen member, 3) holding or hugging			
in an inappropriate manner, 4) dirty jokes, use of profanity.			
I agree to not have personal one-on-one contact with Alateen members outside the			
meetings, in person, via phone, text, email or social media.			
I agree that the Area Alateen Process Person or other persons designated by the			
Idaho Area may independently verify the information presented on this Alateen			
Service Candidate Form.			
I agree to submit to fingerprinting and a background check through the Idaho State			
Police. I agree to my name being checked against the Idaho Sex Offender Registry.			
I agree not to conduct myself in a manner contrary to applicable laws, including			
specific disqualifying crimes listed in Idaho Administrative Code 16.05.06 Section			
210.01.			
I agree to participate in the yearly recertification process. And I agree to repeat a background check every 5 years, according to Idaho guidelines.			
I agree to divulge a disqualifying event promptly, including any requirement or restriction listed here and including charges of a misdemeanor or felony offense.			
Failure to do so will result in being permanently ineligible for Alateen service.			
I agree to attend one Alateen Sponsor training session annually.			
In the event I become an Alateen Sponsor/Al-Anon Member Involved in Alateen			
Service. I agree to abide by all guidelines of the Idaho Area.			

I recognize my primary objective is to be of help. I acknowledge the safety of the teens is paramount and have read and understand the questions above. If I cannot meet these requirements or if asked, for any reason, I agree to step down as an Al-Anon Member Involved in Alateen Service.

Should anything interfere with my objective to be of help, i.e., accusations, controversy, threats of personal harm, etc., I will immediately discontinue working with Alateens and step down from my Alateen service position(s). I understand that stepping away from involvement in Alateen Service is not an admission of guilt. I further agree to perform my Alateen Sponsorship/Al-Anon Member Involved in Alateen Service responsibilities within my district and area guidelines which will be explained in detail during Training.

Candidate Signature:	Date:
District Alateen Coordinator	Date: