

**Reformed Episcopal Church
Diocese of Mid America**

RESOURCES & SAMPLE FORMS

For

Child and Youth Protection

Version 2.3

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EXHIBIT A

**CHILD AND YOUTH
PROTECTION PROGRAM
FOR (*parish name*)**

Adopted *Month/Day/Year*

Introduction

To help protect children, **(PARISH NAME)** has adopted the following Child and Youth Protection Program. It is important that all **(PARISH NAME)** paid staff and volunteers understand and implement these guidelines to help prevent sexual abuse against children and Youth. The following includes the Purpose and Definitions for these guidelines, the outlines of Protection and Prevention, and an Acknowledgement to be signed by those people working with children.

The Policy of this Parish is to deter and to prevent any Physical or emotional abuse caused by either Paid Staff or Volunteers associated with the Parish. No one in the employ or volunteer service of the Diocese or its churches who has a civil or criminal record of child abuse, or who has admitted committing prior sexual abuse of a child, will be permitted to serve with children or youth. In addition, the Training required in this Policy shall be required to be completed by the current Paid Staff, Volunteers, and members of the Vestry within 12 months of the adoption of this Policy.

Purpose

These procedures are designed to reduce the risk of child sexual abuse in order to:

1. Provide a safe and secure environment for children, youth, adults, members, volunteers, visitors, and paid staff.
2. Assist **(PARISH NAME)** in evaluating a person's suitability to supervise, oversee, and/or exert control over the activities of children and youth.
3. Satisfy the concerns of parents and staff members with a screening process for paid staff and volunteers.
4. Provide a system to respond to alleged victims of sexual abuse and their families, as well as the alleged perpetrator.
5. Reduce the possibility of false accusations of sexual abuse made against volunteers and paid staff.

Definitions

The following terms used herein and are defined as follows:

1. *Paid Staff*: Any pastor, minister, preacher, cleric, Deaconess, or employee who is paid.

2. *Children/Youth/Minor*: A child is defined as anyone under the age of 12 years. A youth is defined as anyone who is at least 12 years old, but not yet 18 years old. A youth may also be an individual who is 18 years old or older, but still in high school.
3. *Adult*: Any person who has reached his/her 18th birthday or as defined by state law.
4. *Volunteer*: Means any unpaid person engaged in or involved in activities and who is entrusted with the care and supervision of minors or a person who directly oversees and/or
5. *Sexual Abuse*: The employment, use, persuasion, inducement, enticement, or coercion of any minor or adult to engage in, or assist any other person to engage in, any sexually explicit conduct or any simulation of such conduct for the purpose of producing any visual depiction of such conduct or rape, and in cases of caretaker or inter-familial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of minor or adult, or incest with a minor or adult, or as defined by federal and state law. This includes and is not limited to unwelcome sexual remarks, jokes, advances, leering, whistling, or sexual gestures; sexual touching, fondling, molestation, assault, or other intimate physical contact; compelling another person to engage in a sexual act by threats or fear or undue influence; and providing or displaying pornographic materials to another person.
6. *Child Emotional Abuse*: Verbal or nonverbal conduct including mental exploitation, degrading communication, or humiliating or threatening conduct that may or may not include bullying is non-accidental injury, which is intentionally inflicted upon a child or youth.

Protection and Prevention

Volunteer and Employee Screening Procedures

The following screening procedures are to be used with paid staff and volunteers who are entrusted with the care and supervision of minors or a person who directly oversees and/or exerts control or oversight over minors. All information collected should be maintained in confidence.

1. *Employment Application and Volunteer Application*: Any paid staff and volunteers who will work with a minor must complete the Employment Application and/or the Volunteer Application. The release statement attached to the Application must be signed by the individual completing the Application to apply for and qualify for service.

Our Employment Application includes questions regarding:

- Current and previous residence addresses.

- Current and previous employment, including addresses, dates, duties, titles, and reasons for leaving.
- Names and addresses of schools attended and degree(s) earned.
- References from previous employers and organizations that serve children.
- Pending criminal charges
- Criminal history information.

Our Volunteer Application includes questions regarding:

- Current address.
- Volunteer experience.
- Criminal history information.
- Personal references.

A sample copy of the Application is attached hereto as Exhibit B.

Applications include a statement, which the applicant should acknowledge in writing, certifying that statements provided in the application are true and complete, and any misrepresentation or omission may be grounds for rejection of the applicant or for dismissal if he or she is employed. This statement authorizes **(PARISH NAME)** to contact any individual or organization listed in the application.

2. *Review all statements made in the application.* Pay specific attention to any gaps in time and irregular employment patterns or unexplained absence. Pursue these gaps with employers listed and in a subsequent interview.
3. *Conduct interviews with qualified applicants.* If detrimental information is uncovered but the applicant remains desirable, discuss this information with the applicant. In the event the applicant is ultimately hired or accepted as a volunteer, document the reasons for overriding the prior information. Further any such information and follow up discussion shall be documented in a memoranda kept in the Parish files.

Whenever possible, **(PARISH NAME)** will have an associate participate in the interview.

4. *Contact all listed references for volunteers.* Contact each of the volunteer applicant's references and ask for any information that might help determine the applicant's suitability for the position. If a response is not received within a reasonable period of time, follow up and keep notes if possible.
5. *Contact all listed references and employers for paid staff.* Inquire as to the reason the applicant left and ask for any information that might help determine the applicant's suitability for the position. If a response is not received within a reasonable period of time, follow up and keep notes if possible.

6. *Criminal Background Check:* **(PARISH NAME)** will conduct a criminal background check on all paid staff and volunteers who are entrusted with the care and supervision of minors or a person who directly oversees and/or exerts control or oversight over minors. All criminal background checks will be updated periodically.
7. *Six-Month Rule:* All volunteers will be required to have been a member of **(PARISH NAME)** for six months and have reviewed and signed the Child and Youth Protection Program.
8. *Where possible, the person shall be fingerprinted.* A copy of the fingerprints is to be kept in the Parish files.

Confidentiality

Information obtained through the screening, application, reference check, interview, and criminal background check will be kept in confidence, unless otherwise required by law. All information discovered or obtained through the above-referenced means will be kept in a secure location and access to it will be restricted if possible. These materials will be archived.

Supervision Procedures

Unless an extenuating situation exists, **(PARISH NAME)**:

1. Will have adequate number of screened and trained paid staff or volunteers present at events involving minors. Supervision will increase in proportion to the risk of the activity. There must be a minimum of two adults for each approved program. When both boys and girls are participating, male and female adults must supervise.
2. Church Personnel are prohibited from being alone with a child or youth or multiple children or youth where other adults cannot easily observe them.
3. An up to date list of approved congregation-sponsored programs for children and youth will be maintained in the church office or other place where church records are kept.
4. Church Personnel are not permitted to develop new activities for children and youth without approval from the rector or canonical equivalent. Requests to develop new activities should be submitted in writing to the rector. The rector will consider whether the plan for a new activity includes adequate adult supervision.
5. Will monitor facilities during activities involving children.
6. Will release minors only to a parent or guardian and utilize sign-in and sign-out sheets.

7. Will obtain written parental permission, including a signed medical treatment form and emergency contacts, before taking minors on trips and should provide information regarding the trip.
8. Will use two paid staff or volunteers when transporting minors in vehicles.
9. Will require that young children be accompanied to the restroom and the paid staff or volunteer wait outside the facility to escort the child back to the activity. Whenever possible, the escort will be the same sex as the minor.
10. Will encourage minors to use a "buddy system" whenever minors go on trips off of **(PARISH NAME)** property.
11. Will screen all paid staff and volunteers and approve those individuals in advance for any overnight activities.
12. Will designate a "confidential counselor" to whom any minor can go at any time, without special permission, to discuss any problems he or she is having.

Behavioral Guidelines for Religious Organization Paid Staff

All volunteers and paid staff will observe the following guidelines:

1. Do not provide alcoholic beverages, tobacco, drugs, contraband, or anything that is prohibited by law to minors.
2. To the extent possible, **(PARISH NAME)** events that are co-educational will have both male and female chaperones.
3. Whenever possible, at least two unrelated paid staff or volunteers will be in the room when minors are present. Doors will be left fully open if one adult needs to leave the room temporarily and during arrival to the class or event before both adults are present. Speaking to a minor or minors one-on-one should be done in public settings where paid staff or volunteers are in sight of other people. When architecturally possible, windows into closed off areas shall be installed so that the activity is viewable from other areas.
4. Avoid all inappropriate touching with minors. All touching shall be based on the needs of the individual being touched, not on the needs of the volunteer or paid staff. In the event a minor initiates physical contact and/or inappropriate touching, it is appropriate to inform the minor that such touching is inappropriate.

5. Never engage in physical discipline of a minor. Volunteers and paid staff shall not abuse minors in any way, including but not limited to physical abuse, verbal/mental abuse, emotional abuse, and sexual abuse of any kind.
6. If you recognize an inappropriate relationship developing between a minor and adult, maintain clear professional boundaries and refer the minor to another individual with supervisory authority.
7. If one-on-one pastoral care is necessary, avoid meeting in isolated environments.
8. Anyone who observes abuse of a minor will take appropriate steps to immediately intervene and provide assistance. Report any inappropriate conduct to the proper authorities and officials of **(PARISH NAME)** for handling.

Disqualification

No person may be entrusted with the care and supervision of minors or may directly oversee and/or exert control or oversight over minors who has been convicted of the offenses outlined below, been on a probated sentence or received deferred adjudication for any offense outlined below, or has presently pending any criminal charges for any offense outlined below until a determination of guilt or innocence has been made, including any person who is presently on deferred adjudication. The following offenses disqualify a person from care, supervision, control, or oversight of minors:

1. Any offense against minors as defined by state law.
2. A misdemeanor or felony offense as defined by state law that is classified as sexual assault, indecency with a minor or adult, assault of a minor or adult, injury to a minor or adult, abandoning or endangering a minor, sexual performance with a minor or adult, possession or promoting child pornography, enticing a minor, bigamy, incest, drug-related offenses, or family violence.
3. A prior criminal history of an offense against minors.

Sexual Offender at (PARISH NAME)

(PARISH NAME) may, but is not required, allow a person known to be a sexual offender to remain or become a member of the congregation, but they must adhere to specific guidelines. However, first check with the offender's probation/parole officer for any restrictions regarding attending services or other functions where children are present. Ask the probation/parole officer to put any restrictions in writing. If restrictions do not prohibit offender participation, the following additional four requirements must be implemented and remain in force at all times involving any known sexual offender:

1. The convicted sexual offender cannot participate in any of the child or youth programs in any way.
2. The convicted sexual offender can only participate in a predetermined service each week.
3. The convicted sexual offender must report in and be assigned to an escort who will accompany him or her at all times.
4. The congregation needs to be made aware that a convicted sex offender is attending. However, the name does not need to be disclosed.

Criminal Background Check

A criminal background check will be performed on all paid staff and volunteers that are in a position of responsibility regarding Child or Youth activities. This background check will be performed by _____.

Response to Sexual Abuse

(PARISH NAME) will respond promptly to investigate any accusation of sexual abuse. All accusations of sexual abuse will be taken seriously. It is important to be appropriately respectful to the needs and feelings of those who allege sexual abuse and those who have been accused of sexual abuse.

If the accusation involves any member of Paid Staff, the Bishop shall be notified within 48 hours of the accusation and provided all information available regarding the accusation. Further as the investigation proceeds, frequent updates will be made to the Bishop. If the accusation includes an observation or known case of abuse, then the Bishop shall be notified within 24 hours. If the Bishop is involved as an accused, this report shall be made to the Chancellor of the Diocese, and the other Bishop in the Diocese.

When an allegation is made involving sexual abuse, the person reporting the complaint is to be told about the guidelines and the procedures to be followed. The Senior Warden will begin

investigating the allegations and may use the assistance of legal counsel or other consultants. If the Senior Warden is the individual accused of sexual abuse, then the Bishop of the Diocese will appoint a person to conduct the investigation. The investigation will be conducted as follows:

1. Report the incident to appropriate authorities in accordance with the state mandatory reporting laws.
2. Report the matter to **(PARISH NAME)** 's insurance carrier.
3. Cooperate with authorities and the insurance carrier.
4. **(PARISH NAME)** may suspend (with pay for paid staff) the alleged offender while a confidential investigation is being conducted.
5. The appointed investigating officer of **(PARISH NAME)** (and legal counsel or other consultants) will then meet with the governing body of **(PARISH NAME)** and present a report on their investigation, which will include findings and recommendations of actions. A copy of this report will be made to the Bishop and the Bishop or his designee shall be invited to the meeting.
6. An official of **(PARISH NAME)** will meet with the alleged perpetrator and notify him/her of the results of the investigation and recommendations for actions. An additional member of the Vestry shall be present at this meeting.
7. An official of **(PARISH NAME)**, along with another member of the Vestry, will meet with the alleged victim, along with his/her parents or guardians, and notify them of the results of the investigation and recommendations for actions.
8. During the investigation, an official of **(PARISH NAME)** shall maintain contact with the alleged victim and his/her parents or legal guardian, and inform them of the actions taken and assist them in their process of healing. This healing process will be under the direction of the Rector of the Parish.
9. An official of **(PARISH NAME)** (and legal counsel or other consultants) may meet with the alleged perpetrator, the alleged victim, and any others with knowledge of relevant facts.
10. Communicate with criminal and civil legal counsel of **(PARISH NAME)** .
11. Communicate with those affected by the ministry of the alleged perpetrator.
12. Hire a consultant or assign a spokesperson to respond to media or prepare a statement for the media if the need shall arise, subject to the approval of **(PARISH NAME)** 's attorney.

Training

A. Reading Requirements

All members of the clergy, all members of the vestry, and those staff members with direct supervision over youth or children must certify that they have read, understood and accepted the Diocese of the Mid-America Policies on the Child and Youth Protections Policy. The acknowledgement form is included in Exhibit B.

B. Workshop Attendance Requirements

Every two years, clergy, vestry, and those staff and volunteers who have contact with youth and children must either:

- Attend a diocesan-approved training workshop on the prevention of child abuse or
- Complete the online Sexual Abuse Prevention Course approved by the Parish Vestry. A copy of the certificate of completion that is presented at the end of the diocesan-approved workshop or the proof of completion of the Ministry Safe online training is sufficient to demonstrate compliance with this requirement.

The Parish shall track and document the training/retraining of its vestry, staff and volunteers.

EXHIBIT B

Application

NAME OF THE CHURCH _____

Application, Code of Conduct, Acknowledgment and Release Signature

Instructions: *Please complete all of the questions accurately and fully; attach additional sheets if needed.*

Today's date: _____

PERSONAL DATA

Name: _____

Street address: _____

State: _____ Zip: _____

How long at current address: _____

Home phone: _____

Cell phone: _____

Best time to contact you: _____

Email address: _____

Driver license number: _____ STATE: _____

Social Security number: _____

Are you legally eligible to work in this country? ☐ Yes ☐ No

Note: If you are chosen for a paid position, you will be required to show documents verifying your employment eligibility and identity to complete the INS Form 1-9 as required by the Immigration Reform and Control Act.

Please list your addresses in the past five years:

_____	_____
_____	_____
_____	_____

For what position are you applying?

What interests you about the position for which you are currently applying?

What has prepared you for the position for which you are currently applying?

EMPLOYMENT HISTORY (PLEASE COMPLETE FOR YOUR PRIOR EMPLOYERS, COVERING THE PAST 10 YEARS)

CURRENT EMPLOYER Company Name: _____
Street address: _____
City & State: _____ Zip: _____
Immediate Supervisor Name: _____
Immediate Supervisor Name Phone: _____
Position Held: _____
Date of Employment: from _____ to _____
Reason for Leaving: _____

PREVIOUS EMPLOYER Company Name: _____
Street address: _____
City & State: _____ Zip: _____
Immediate Supervisor Name: _____
Immediate Supervisor Name Phone: _____
Position Held: _____
Date of Employment: from _____ to _____
Reason for Leaving: _____

PREVIOUS EMPLOYER Company Name: _____
Street address: _____
City & State: _____ Zip: _____
Immediate Supervisor Name: _____
Immediate Supervisor Name Phone: _____
Position Held: _____
Date of Employment: from _____ to _____

Previous Employer

Company Name: _____

Street address: _____

City & State: _____ Zip: _____

Immediate Supervisor Name: _____

Immediate Supervisor Name Phone: _____

Position Held: _____

Date of Employment: from _____ to _____

Reason for Leaving: _____

VOLUNTEER EXPERIENCE (Include all experience working with youth or children)

Organization: _____

Contact Name: _____

Contact Phone: _____

Duties: _____

Dates: from _____ to _____

Reason for Leaving: _____

Organization: _____

Contact Name: _____

Contact Phone: _____

Duties: _____

Dates: from _____ to _____

Reason for Leaving: _____

Have you ever been accused of physically, sexually or emotionally abusing a child or adult?

____ Yes ____ No

If yes, please explain below:

EDUCATIONAL HISTORY School Name: _____

Street address: _____

City & State: _____ Zip: _____

Type of School: _____

Program or Degree: _____

Program Completed?: _____

School Name: _____

Street address: _____

City & State: _____ Zip: _____

Type of School: _____

Program or Degree: _____

Program Completed?: _____

School Name: _____

Street address: _____

City & State: _____ Zip: _____

Type of School: _____

Program or Degree: _____

Program Completed?: _____

PROFESSIONAL / CIVIC REFERENCES

Name: _____

Street address: _____

City & State: _____ Zip: _____

Phone: _____

Known how long? : _____

Relationship to you : _____

PROFESSIONAL / CIVIC REFERENCES CONTINUED

Name: _____
Street address: _____
City & State: _____ Zip: _____
Phone: _____
Known how long? : _____
Relationship to you : _____

PERSONAL REFERENCES

Name: _____
Street address: _____
City & State: _____ Zip: _____
Phone: _____
Known how long? : _____
Relationship to you : _____

Name: _____
Street address: _____
City & State: _____ Zip: _____
Phone: _____
Known how long? : _____
Relationship to you : _____

Name: _____
Street address: _____
City & State: _____ Zip: _____
Phone: _____
Known how long? : _____
Relationship to you : _____

CODE OF CONDUCT FOR THE PROTECTION OF CHILDREN AND YOUTH

Please read and initial each item to signify your agreement to comply with the statement.

- _____ I to prevent abuse and neglect among children and youth involved in church activities and services.
- _____ I agree not to physically sexually or emotionally abuse or neglect a child or youth.
- _____ I agree to comply with the Policy for General Conduct for the Protection of Children and Youth defined in the Policies for the Protection of Children and Youth from Abuse.
- _____ I agree to comply with the Standards for Appropriate Affection with children and youth.
- _____ In the event that I observe any inappropriate behaviors or possible policy violations with children or youth, I agree to immediately report my observations.
- _____ I acknowledge my obligation and responsibility to protect children and youth and agree to report known or suspected abuse of children or youth to appropriate church leaders and state authorities in accordance with the Policies for the Protection of Children and Youth from Abuse.
- _____ I understand that the church will not tolerate abuse of children and youth and I agree to comply in spirit and in action with this position.

ACKNOWLEDGMENT, RELEASE AND SIGNATURE

To the best of my knowledge, the information contained in this application is complete and accurate. I understand that providing false information is grounds for not hiring me or choosing me for a volunteer position or for my discharge if I have already been hired or chosen.

I authorize any person or organization, whether or not identified in this application, to provide any information concerning my previous employment, education, credit history, driving record, criminal conviction record, sexual offender registry or other qualifications for my employment or volunteering. I also authorize **the NAME OF CHURCH to** request and receive such information.

If hired or chosen, I agree to be bound by the _____ (**NAME OF THE CHURCH**) policies and procedures, including but not limited to its Policies for the Protection of Children and Youth from Abuse and Code of Conduct for the Protection of Children and Youth. I understand that these may be changed, withdrawn, added to or interpreted at any time at the **NAME OF THE CHURCH** sole discretion and without prior notice to me. I also understand that my employment or volunteering may be terminated, or any offer or acceptance of employment or volunteering

withdrawn, at any time, with or without cause, and with or without prior notice at the option of the **NAME OF CHURCH** or myself.

Nothing contained in this application or in any pre-employment or pre-volunteering communication is intended to or creates a contract between myself and the **NAME OF THE CHURCH** for employment, volunteering or the providing of any benefit.

I have read and understand the above provisions.

Signature:_____ Date:_____

EXHIBIT C

Sample Screening Statement

Have you ever:

- Been arrested for, or convicted of, any crime involving child abuse and/or neglect, or had any such conviction expunged? ____ Yes ____ No
- Been charged with child sexual abuse in a civil proceeding? ____ Yes ____ No
- Committed an act of child sexual abuse? ____ Yes ____ No
- Been diagnosed with any paraphiliac psychological condition, as defined by the American Psychiatric Association, including, but not limited to, pedophilia, voyeurism, or exhibitionism (except where such inquiry is prohibited or limited by applicable laws or regulations)? ____ Yes ____ No

Has any other member of your household:

- Been arrested for, or convicted of, any crime involving child abuse and/or neglect, or had any such conviction expunged? ____ Yes ____ No
- Been charged with child sexual abuse in a civil proceeding? ____ Yes ____ No
- Committed an act of child sexual abuse? ____ Yes ____ No
- Been diagnosed with any paraphiliac psychological condition, as defined by the American Psychiatric Association, including, but not limited to, pedophilia, voyeurism, or exhibitionism (except where such inquiry is prohibited or limited by applicable laws or regulations)? ____ Yes ____ No

Printed Name

Signature

Date

EXHIBIT D

Sample Policy Acknowledgement Form

I certify that I have read (check all that apply):

- ☐ the _____
(Name of church)
Prevention of Child Abuse Policy and/or
- ☐ the Diocesan Policy Manual on the Protection of Children

I further certify that I will abide by the provisions of this policy as long as I am an employee/volunteer of the church.

Printed Name

Signature

Date

EXHIBIT E

Sample form for Report of Suspected Child Abuse

Confidential: Keep completed form in locked file

Information Regarding the Person Suspected of Child Abuse:

Name of suspected abuser: _____

Address: _____

Telephone (home/work/cell): _____

Title/relationship to the church (if any):

Information Regarding Suspected Victim(s):

Name of suspected victim: _____

Age: _____ Male/Female: _____

Address: _____

Telephone (home/work/cell): _____

Relationship to the church: _____

Name of any other suspected victim: Age: _____ Male/Female: _____

Address: _____

Telephone (home/work/cell): _____

Relationship to the church: _____

This sample form is provided as one possible resource. The church should consult with its legal counsel before implementing this specific form and regarding its use and maintenance in specific circumstances.

Confidential: Keep completed form in locked file
Information Regarding Incident(s) of Suspected Child Abuse:

How did you become suspicious of possible abuse?

Describe any physical evidence of the suspected abuse:

Describe each incidence of suspected sexual abuse, including the type of abuse, date(s), time(s), and location(s) of suspected abuse:

Name any eyewitness to each suspected abuse incident (additional information regarding witnesses is sought below), and describe how that witness viewed the event:

"

"

Confidential: Keep in completed form in locked file

Information Regarding Witnesses to Suspected Child Abuse:

Name of witness: _____

Age of witness: _____

Address: _____

Telephone (home/work/cell): _____

Relationship to the church: _____

Name of additional witness: _____

Age of witness: _____

Address: _____

Telephone (home/work/cell): _____

Relationship to the church: _____

Information Regarding Person(s) to Whom Suspected Abuse was Reported:

Name and title of church official to whom the abuse initially was reported (for example, Sunday School teacher, Rector, etc.):

Address: _____

Telephone (home/work/cell): _____

Date that initial report was made: _____

Name and title of the person making the initial report to the church official:

Address: _____

Telephone (home/work/cell): _____

Relationship to the church (if any):

Confidential: Keep completed form in locked file

Was the suspected abuse reported to Child Protective Services ("CPS")?

If yes, state the date the report was made to CPS: _____

Name and title of person reporting to CPS: _____

Address: _____

Telephone (home/work/cell): _____

Name of CPS worker contacted: _____

CPS contact's telephone number: _____

Was the suspected abuse reported to police?

If yes, state the date the report was made to police: _____

Name and title of person reporting to police: _____

Address: _____

Telephone (home/work/cell): _____

Police department and contact person: _____

Police contact's telephone number: _____

Were the parents notified?

If yes, the date parents were notified: _____

Name and title of person notifying parents: _____

Address: _____

Telephone (home/work/cell): _____

Parents' names: _____

Parents' address: _____

Parents' telephone (home/work/cell): _____

Confidential: Keep completed form in locked file

Was suspected abuse reported to the Diocese via telephone?

If yes, the date report was made to the Diocese: _____

Name and title of person reporting to the Diocese: _____

Address: _____

Telephone (home/work/cell): _____

Diocese contact person: _____

Diocese contact's telephone: _____

Is a copy of this completed report being sent to the Diocese?

If yes, state date when report is being sent: _____

Name and title of person sending report to the Diocese: _____

Address: _____

Telephone (home/work/cell): _____

Diocese contact person to whom report is being sent: _____

Any other information which may be helpful to the investigation:

Confidential: Keep completed form in locked file Information Regarding Person Completing this Form:

Name and title: _____

Address: _____

Telephone (home/work/cell): _____

Signature: _____

Date: _____

EXHIBIT F

Implementing MinistrySafe

MinistrySafe is an extensive safety system designed to reduce the risk of child sexual abuse in your congregation. Ministry Safe provides on-line child sexual abuse awareness training, has sample policies and procedures that can be tailored to your particular situation, and provides training in skillful screening and guidelines for monitoring and oversight of the program. This program has been endorsed by the Anglican Church in North America and is its **minimum** standard.

Cost Involved:

\$250/year membership

\$11.95 per screening

How Ministry Safe works:

1. Members have access to an online control panel for their particular congregation. This enables you to monitor all your staff and volunteers who should take the training.
2. The email of each person who is to take the training is entered. A link is automatically sent to that person. The link never expires; a person can view the training videos as often as he likes. However, one can only take the test and pass once. The link is specific to that person's records so cannot be shared. Once a person has passed the test, a certificate of completion is automatically sent to the individual and the administrator. The Control panel is automatically updated.
3. Members also have access to resources:
 - A policy and procedure manual
 - Sample application forms for volunteers and staff
 - Sample Interview form
 - Interview instructions
 - Description of high- and low-risk responses
 - Cover letter asking for references
 - Reference forms for use by mail and for use by telephone

Signing up with Ministry Safe

1. Administrator should go to www.ministrysafe.com.
2. Click on "Programs at the side panel, then "Churches" on the following page. There is information here including a demo video of what Ministry Safe offers. If you're ready to join, click on the link "Becoming a Ministry Safe member" at the bottom of the page, or the tab on the left had side, "Begin Today" and follow the prompts.
3. You will be asked to pick a user name and password.

4. **Note: If your church is sponsoring a church plant, simply add it as a separate department.**

Suggestions on how to Implement Ministry Safe as a training tool in your congregation:

1. Each congregation should appoint an administrator who will manage users.
2. A committee should also be formed to review the DMA policy and procedure manual and adapt it for your congregation. Check with an attorney to make sure that guidelines and reporting procedures conform to your state.
3. We strongly recommend that churches hold a training session where the group watches the video together before entering their names with MinistrySafe. Please be aware that this video could be traumatic or open old wounds for someone who has experienced abuse. There should be someone present who can give counsel or refer that person for further counseling if needed.
4. The second part of the training session should include going over the DMA policy and procedure manual and discussing how this will be implemented in your church. Everyone should understand these procedures and how they are to be implemented and sign an agreement to that effect.
5. Each individual would then be entered into the MinistrySafe System and receive his own link to the video and test. They may choose to re-watch the video or just go ahead and take the test. The link should be saved as it is always available should the person wish to review it. The test consists of 25 multiple-choice questions.

EXHIBIT G

State Resources for Reporting and obtaining certain information

State Child Abuse Reporting Statute Websites

Alabama	www.dhtstate.al.us
Alaska	www.hss.state.ak.us/ocs
Arizona	www.de.state.az.us/dcyf/cps
Arkansas	www.arkansas.gov/dhs/chlInfamI
California	www.dss.cahwetgov/cdssweb/default.htm
Colorado	www.cdhs.state.co.us
Connecticut	www.dss.state.ct.us/dss.htm
Delaware	www.state.de.us/dhss/
District of Columbia	www.childwelfare.com/states/district_of_columbia.htm
Florida	www.state.fl.us/cf_web
Georgia	www.gahsc.org
Hawaii	www.hawaii.gov/dhsI
Idaho	www.idahochild.orgI
Illinois	www.state.ill.us/dcfslindex.htmI
Indiana	www.in.gov/lfssa
Iowa	www.dhs.state.ia.us
Kansas	www.srskansas.org/
Kentucky	www.childwelfare.com/states/kentucky.htm
Louisiana	www.dss.state.la.us
Maine	www.state.me.us/dhs
Maryland	www.dhtstate.md.us/lcps
Massachusetts	www.state.ma.us/dss
Michigan	www.michigan.gov/lfia
Minnesota	www.hs.state.mn.us
Mississippi	www.mdhsstate.m.us
Missouri	www.dss.state.mo.us/dfs.csp.htm
Montana	www.dphhs.state.mt.us
Nebraska	www.hhs.state.ne.us
Nevada	www.dcf.state.nv.us
New Hampshire	www.cfsnh.org
New Jersey	www.state.nj.us/humanservices
New Mexico	www.state.nm.us/lcyfd
New York	www.ocfs.state.ny.us
North Dakota	www.childwelfare.com/states/north_dakota.htm
Ohio	www.state.oh.us/dhslcdc
Oklahoma	www.okdhs.org
Oregon	www.dhs.state.or.us/labuse
Pennsylvania	www.dpw.state.pa.us/ocyf/dpwocylasp

Puerto Rico	www.childwelfare.com/states/Puerto_Rico.htm
Rhode Island	www.dcyfstate.ri.us
South Carolina	www.state.sc.us/dss/cpslindex.html
South Dakota	www.state.sd.us/social/CPS
Tennessee	www.state.tn.us/humanserv
Texas	http://www.dfps.state.tx.us/
Utah	www.hcdcfs.utah.gov
Vermont	www.State.vt.us/srs/
Virginia	www.dss.state.va.us
Washington	www.wa.gov/dshs
West Virginia	www.wvdhhr.org
Wisconsin	www.dhfs.state.wi.us
Wyoming	www.dfs.web.state.wy.us/

State Criminal Records and Sex Offenders Registry Information

Alabama

Agency Alabama Bureau of Investigation

Identification Unit - Record Checks

P. O. Box 1511

Montgomery, AL 36102-1511

(334) 260-1100 phone

(334) 395-4350 fax

jamespotts@gsiweb.net

Website www.dps.state.al.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry. The Online Sex Offender Registry is available at www.gsiweb.net.

Alaska

Agency Department of Public Safety

Records and Identification Bureau

5700 East Tudor Road

Anchorage, AK 99507

(907) 269-5511 phone

(907) 269-5091 fax

Website www.dps.state.ak.us

Criminal Background Check Criminal background records are obtained through fingerprint checks.

Sex Offender Registry. The Sex Offender Registry hotline is (907) 269-5767.

Arizona

Agency Arizona Department of Public Safety

Attn: Applicant Clearance Card Team

Mail Code 2200

P. O. Box 6638

Phoenix, AZ 85005-6638
(602) 223-2223 phone
(602) 223-2972(Attn: Applicant Team 1) fax
Website www.dps.state.az.us
Criminal Background Check Criminal background records are obtained through fingerprint checks.
The Sex Offender Registry hotline is (602) 223-2876.

Arkansas

Agency Arkansas State Police
Identification Bureau
#1 State Police Plaza Drive
Little Rock, AR 72209
(501) 618-8500
(501) 618-8404 fax
Website www.aps.state.ar.us
Criminal Background Check Criminal background records are obtained through name and date of birth checks.
Sex Offender Registry The Sex Offender Registry hotline is (501) 682-2222.

California

Agency State of California
Department of Justice Record Security Section,
C-121 P. O. Box 903387
Sacramento, CA 94203-3870
(916) 227-2928
Website www.caag.state.ca.us
Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.
Sex Offender Registry The Sex Offender Registry hotline is (860) 685-8060.

Colorado

Agency Colorado Bureau of Investigations
690 Kipling Street, Suite 3000
Denver, CO 80215
(303) 239-4300 phone
Website www.sor.state.co.us
Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.
Sex Offender Registry The Sex Offender Registry hotline is (303) 239-4208. The online Sex Offender Registry is available at www.sor.state.co.us.

Connecticut

Agency State of Connecticut
Department of Public Safety
Attn: Bureau of ID, Records Section
1111 Country Club Road
P.O. Box 2794

Middletown, CT 06457-9294

(860) 685-8480 (for Name and Date of Birth Check)

(860) 685-8270 (for Fingerprint Check) Website www.state.ct.usldpsl

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (860) 685-8060.

The online Sex Offender Registry is available at www.state.ct.usldpsl/SexOffenderRegistryNOTICE.htm

Currently, information on registered sex offenders is only available to law enforcement personnel. This law is being appealed before the U.S. Supreme Court.

Delaware

Agency Delaware State Police
State Bureau of Identification
1407 N. Dupont Highway
Dover, DE 19901

(302) 739-5880

Website www.state.de.us

Criminal Background Check Criminal background records are obtained through fingerprint checks.

Sex Offender Registry The online Sex Offender Registry is www.state.de.us.

District of Columbia Agency Metropolitan Police Department

Attn: Mail in Correspondence
300 Indiana Ave. N.W., Room 3061
Washington, DC 20001
(202) 727-4245

Website www.ci.washington.dc.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (202) 727-4407.

Florida

Agency Florida Department of Law Enforcement
P.O. Box 1489

ATTN: USB (User Services Bureau)

Tallahassee, FL 32302

(850) 410-8109

Website www.2.fdle.state.fl.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or on the internet.

Sex Offender Registry The Sex Offender Registry hotline is (850) 410.8572.

Georgia

Agency Georgia Bureau of Investigations
3121 Panthersville Road
Decatur, GA 30034
(404) 244-2770

Website www.ganet.org/gbi

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The online Sex Offender Registry is www.ganet.org/gbi.

Hawaii

Agency Hawaii Criminal Justice Data Center
465 South King Street
Room 101 Administration
Honolulu, HI 96813
(808) 587-3100

Website: www.state.hi.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (808) 587-3100.

Idaho

Agency Idaho State Police
Attn: BCI (Bureau of Criminal Identifications)
P. O. Box 700
Meridian, ID 83642
(208) 884-7134

Website www.isp.st.id.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (208) 884-7305.

Illinois

Agency Illinois State Police
Information and Technology Command
Bureau of Identification
260 North Chicago
Joliet, Illinois 60432-4075
(815) 740-5189

Website: www.state.il.us/isp/isphpage.htm

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (815) 740-5211.

Indiana

Agency Indiana State Police, Central Repository

100 North Senate Avenue, Room N302
Indianapolis, IN 46202-259
(317) 232-8266

Website: www.in.gov/lsp/lch

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (317) 232-2560.

Iowa

Agency Iowa Division of Criminal Investigation
Bureau of Identification
Wallace State Office Building
Des Moines, IA 50319

(515) 281-5138

(515) 242-6876 fax

Website: www.state.ia.us/govtldps/dci/crimhist.htm

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (515) 281-4976.

Kansas

Agency Kansas Bureau of Investigations
Criminal Justice Information Systems Division
Attn: Adult Records (NCJRC)
1620 S. W. Tyler

Topeka, KS 66612-1837

(785) 296-8200

Website: www.kbi.state.ks.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The online Sex Offender Registry is available at www.kbi.state.ks.us.

Kentucky

Agency Kentucky State Police
Records Branch
1250 Louisville Road
Frankfort, KY 40601

(502) 227-8700

(502) 227-8734 fax

Website: Website is unavailable at this time.

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (502) 227-8700.

The Sex Offender Registry is only available with a criminal Background check.

Louisiana

Agency Louisiana State Police
Bureau of Criminal Identification and Information
P.O. Box 66614, Mail Slip 18
Baton Rouge, LA 70896-6614
(225) 925-6095
(225) 925-7005 fax
Website: www.state.la.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (225) 925-6100.

Maine

Agency State Bureau of Identification
42 State House Station
Augusta, ME 04333
(207) 624-7009
Website: www.state.me.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (207) 624-7100.

Maryland

Agency Central Repository C.JIS
P. O. Box 32708
Pikesville, MD 21282-2708
(410) 764-4501

Website: Website is unavailable at this time.

Criminal Background Check Criminal background records are obtained through fingerprint checks. Sex Offender Registry The Sex Offender Registry is available through a written request including name, address and reason for your request either faxed to (410) 653-5690 or e-mailed to sor@dpscs.state.md.us.

Massachusetts

Agency Criminal History Systems Board
Attn: CORI unit
200 Arlington Street
Chelsea, MA 02150
(617) 472-2881 ext. 340
Website: www.state.ma.us/chsb

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (978) 740-6400.

Michigan

Agency Michigan State Police CJIC

7150 Harris Dr.

Lansing, MI 48913

(517) 322-1956

Website: www.michigan.gov

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (517) 322-4939.

The online Sex Offender Registry is available at www.mipsor.state.mi.us.

Minnesota

Agency Minnesota Department of Public Safety

Bureau of Criminal Apprehension

Criminal Justice Information Systems Section

1246 University Avenue

St. Paul, Minnesota 55104

(651) 642-0670

Website: www.dps.state.mn.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry phone number is (651) 603-6748.

The online Sex Offender Registry is available at www.doc.state.mn.us.

Mississippi

Agency Mississippi State Department of Health

Child Care Facilities Licensure Central Office

P.O. Box 1700

Jackson, MS 39215

(601) 576-7613

Website: www.msdh.state.ms.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (800) 222-8000.

Missouri

Agency Missouri State Highway Patrol

Criminal Records and ID Division

P.O. Box 568

1510 East Elm St.

Jefferson City, MO 65102

(573) 526-6153

Website: www.state.mo.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry is available through your local sheriff's department.

Montana

Agency ID Bureau
P. O. Box 201403
Helena, MT 59620-1403
(406) 444-3625

Website: Website is unavailable at this time.

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (406) 444-9479.

Nebraska

Agency Nebraska State Patrol
Attn: CID
P. O. Box 94907
Lincoln, NE 68509
(402) 471-4545

Website: www.state.ne.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (402) 471-8647.

New Hampshire

Agency New Hampshire State Police
James Hayes Safety Building
10 Hazen Drive
Concord, NH 03305
(603) 271-2538

Website: www.state.nh.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (603) 271-2663.

New Jersey

Agency New Jersey State Police
Records and Identification Section
P. O. Box 7068 West Trenton, NJ 08625-0068
(609) 882-2000

Website: www.state.nj.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (609) 882-2000.

New Mexico

Agency Department of Public Safety

4491 Cerrillos Rd.

Santa Fe, NM 87504

(505) 827-9181

Website: www.state.nm.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (505) 827-9181.

New York

Agency Office of Court Administration

Criminal Search Intake Unit

25 Beaver Street

New York, New York 10004

(212) 428-2810

Website: www.courts.state.ny.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Sex Offender Registry The Sex Offender Registry hotline is (900)288-3838.

North Carolina

Agency State Bureau of Investigation

North Carolina Department of Justice

P. O. Box 29500

Raleigh, NC 27626-0500

(919) 662-4500

Website: www.state.nc.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The online Sex Offender Registry is available at <http://sbi.jus.state.nc.us/DOJHAHT/SOR/Default.htm>.

North Dakota

Agency North Dakota Bureau of Criminal Investigations

Criminal Records Section

4205 State Street (zip code is 58503)

P.O. Box 1054

Bismarck, ND 58502-1054

(701) 328-5500

Website: www.ag.state.nd.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (701) 328-5500.

Ohio

Agency Ohio Bureau of Criminal Identification

P.O. Box 365

London, OH 43140

(740) 845-2000

Website: www.state.oh.us

Criminal Background Check Criminal background records are obtained through fingerprints Sex Offender Registry The Sex Offender Registry is only available with a criminal background check.

Oklahoma

Agency Oklahoma State Bureau of Identification

Criminal History Reporting

6600 North Harvey, Building 6, Suite 140

Oklahoma City, OK 73116

(405) 879-2528

Website: www.osbi.state.ok.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Hotline is (405) 228-20

Oregon

Agency Oregon State Police, Attn: Open Records, Unit 11

P.O. Box 4395

Portland, OR 97208-4395 (503) 378-3070

Website: www.osp.state.or.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

The Sex Offender Registry The Sex Offender hotline is (503) 378-3720.

Pennsylvania

Agency Pennsylvania State Police

Records and Identification Division

1800 Elmerton Avenue

Harrisburg, PA 17110

(717) 783-5492

Website: www.state.pa.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (717) 705-4253.

Rhode Island

Agency Department of Attorney General Office Attn: BCI

150 South Maine Street

Providence, RI 02903

(401) 421-5268

Website: www.state.ri.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks. Sex Offender Registry The Sex Offender Registry hotline is (401) 421-5268 ext.2288

South Carolina

Agency SLED(State Law Enforcement Division)

Attn: Records

P. O. Box 21398

Columbia, SC 29221

(803) 737-9000

Website: www.sled.state.sc.us

Criminal Background Check Criminal background records are obtained through name and date of birth checks.

Criminal background records can be obtained online at www.sled.state.sc.us.

Sex Offender Registry The online Sex Offender Registry is available at www.sled.state.sc.us.

South Dakota

Agency Division of Criminal Investigation

Identification Section

500 East Capital

Pierre, SD 57501-5070

Website: www.state.sd.com

Criminal Background Check Criminal background records are obtained through fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (605) 773-3331.

Tennessee

Agency Tennessee Bureau of Investigation

Records and Identification Unit - Applicant Processing

901 R. S. Gaas Blvd.

Nashville, TN 37216

(615) 744-4000

Website www.tbi.state.tn.us

Criminal Background Check Criminal background records are obtained through fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (615) 744-4000.

Texas

Agency Texas Department of Public Safety

Crime Records Division

P.O. Box 4143

Austin, Texas 78765

(512) 424-5664

Website: www.txdps.state.tx.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline (512) 424-2279.

Utah

Agency Utah Department of Criminal Identification

3888 W. 5400 South

Salt Lake City, UT 84114-8280

(801) 965-4569

Website: www.bci.utah.gov

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (801) 538-4003.

Vermont

Agency Vermont Criminal Information Center

Department of Public Safety

103 South Main Street

Waterbury, VT 05671-2101

(802) 244-8727

Website www.dps.state.vt.us

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (802) 241-5400.

Virginia

Agency Virginia State Police

7700 Midlophian Turnpike

Richmond, VA 23235

(804) 674-2000

Website: www.virginiatrooper.org

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (804) 674-2000.

Washington

Agency Washington State Patrol

Identification and Criminal History Section

P. O. Box 42633

Olympia, WA 98504-2633

(360) 705-5100

Website: <https://llwatch.wsp.wa.gov>

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry is available through your local sheriff's department.

West Virginia

Agency West Virginia State Police

Criminal Identification Bureau

Records Section

725 Jefferson Road

South Charleston, WV 25309

(304) 746-2100

Website: www.wvstatepolice.com

Criminal Background Check Criminal background records are obtained through fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline (304) 746-2133.

Wisconsin

Agency Crime Information Bureau

Record Check Unit

P.O. Box 2688

Madison, WI 53701 -2688

(608) 266-5764

Website: <http://llwi-recordcheck.org>

Criminal Background Check Criminal background records are obtained through either name and date of birth checks or fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline (800) 398-2403.

Wyoming

Agency Division of Criminal Investigation

316 West 22nd St.

Cheyenne, WY 82002

(307) 777-7523

Website: www.wy.state.us

Criminal Background Check Criminal background records are obtained through fingerprint checks.

Sex Offender Registry The Sex Offender Registry hotline is (307) 777-7809.