**DIOCESE OF KANSAS CITY-ST. JOSEPH**

**PARISH SAFE ENVIRONMENT COMPLIANCE FORM FOR 7/1/19-6/30/20 AUDIT PERIOD**

***Please complete this form and return to OCYP by 10/1/19.***

Scan/email to [ocyp@diocesekcsj.org](mailto:ocyp@diocesekcsj.org) OR fax to the attention of OCYP at 816-817-7219 OR

mail to OCYP at PO Box 419037, KCMO 64141-6037

**TO BE COMPLETED BY THE SAFE ENVIRONMENT COORDINATOR:**

Parish/Mission Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pastor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pastor’s Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ Number of **Priests** in ministry in the Parish, including retired priests in active ministry

\_\_\_\_\_\_\_\_ Number of **Deacons** in ministry in the parish

\_\_\_\_\_\_\_\_ Number of **Paid Parish staff**, part-time and full-time employees, NOT including priests, deacons, and Catholic school staff

\_\_\_\_\_\_\_\_ Number of **Volunteers** serving with minors/vulnerable adults in parish programs (i.e. catechists, youth ministers, coaches, etc. in all church youth programs; not Catholic school volunteers)

Will you have SOR, Youth Programs, or Sacramental Preparation at this parish/mission from 7/1/19 through 6/30/20?

Yes\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_

**Name and Email of DRE – Director of Religious Education:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name and Email of DYM – Director of Youth Ministry**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name and Email of Director of Confirmation:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name and Email of SEC - Safe Environment Coordinator:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of SEC providing oversight of safe environment requirements and submitting audit forms:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ATTESTATION BY PASTOR:**

With my signature, I attest that all parish employees, and all volunteers serving in a parish program where minors or vulnerable adults are typically present, are in compliance with the following safe environment requirements:

1. Completion of a VIRTUS *Protecting God’s Children* workshop, or have pre-registered and will be attending a workshop, as verified within the VIRTUS database.
2. Background checks have been completed every 5 years, or are in the process of being completed, as verified within the VIRTUS database.
3. Signed acknowledgements of commitment to our code of ethics, *Ethics and Integrity in Ministry,* as verified within the VIRTUS database.

**Signature of Pastor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_