

To be involved with the students of St. Rose of Lima School (volunteering, coaching, chaperoning, lunchtime duty, etc) you must be in compliance with ***Protecting God's Children Program***.

To be in **compliance** the following must be completed

3-hour class on *Protecting God's Children*

All paper work completed and signed (take with you to the class)

The paperwork will be returned to St. Rose and kept on file

\$12.00 fee for a completed background check that is done online
(renewable every 3 years)

Attached is all the information needed to, find a *Protecting God's Children's* class, register, and all the papers needed to be filled out and taken to the class. There is one form to be sent directly to ST. ROSE OF LIMA SCHOOL with your \$12.00 fee.
(payable to "St. Rose of Lima School ")



**Diocese of Altoona-Johnstown
Protecting God's Children Program
126A Logan Boulevard
Hollidaysburg, Pa 16648**

814-693-9333

Fax 814-696-6725

dleiden@dioceseaj.org

echilcote@dioceseaj.org

Obtaining a Listing of Up-coming Training Sessions

1. Go to www.virtusonline.org.
2. Click on the word Registration located in the green left side panel under Login.
3. Click on view a list of sessions.
4. Select Diocese of Altoona-Johnstown. Then click Select.
5. A list of up-coming sessions will be shown. You can go directly to the registration process from here.

**If you do not have access to the internet, you may
contact the number listed above.**



Diocese of Altoona-Johnstown
Children & Youth Protection and Advocacy Office
5379 Portage Street
Lilly, PA 15938
814-886-8250
Fax 814-886-7758
srmarilyn@dioceseaj.org

Pre-registration Instructions

1. Go to www.virtusonline.org.
2. Click the yellow link labeled "Registration."
3. Choose Diocese of Altoona-Johnstown from the pull down menu by clicking the downward arrow and shading Diocese of Altoona-Johnstown by holding down your mouse button.
4. Once Diocese of Altoona-Johnstown has been selected, click "Select."
5. Choose the first option, labeled, "I would like to attend a Protecting God's Children Session," by clicking on the green arrow.
6. Create a user name and a password you can easily remember. This is needed for the on-going training bulletins you are required to read.
7. Select the location where you work or volunteer, not necessarily your parish.
8. Select the department you work for in your role as an employee or volunteer. (if any)
9. Select your classification (clergy, employee, volunteer, for example)
10. Other required fields include name and phone number.
11. Enter your e-mail address – it is required.
 - If you do not have an email address, consider obtaining a free account at www.yahoo.com, or any other free service or consider sharing an email account with someone else.
 - If you have neither internet access nor an e-mail address, you will need to receive your bulletins by USPS mail. Enter: noaddress@virtus.org.
12. Finish filling out the form and click "submit" at the bottom of the screen.
13. Now on the new screen that appears: Click the button to the left of the class for which you wish to register. If the page indicates the session is full, you will need to select another session or contact the Protecting God's Children Office 814-886-8250.
14. Click the "Submit Registration" button. You will get a confirmation message on the screen telling you that your registration was successful.

Once you submit your registration, you will receive an e-mail message confirming that you have been registered for the session you selected.

PLEASE NOTE:

You will not need to re-register after the session if you pre-register.



Diocese of Altoona-Johnstown

Personnel Application and Screening Form: to be completed by all clergy, religious, lay employees, volunteers engaged in ministry within the Diocese of Altoona-Johnstown involving or having access to children and youth.

Personal Information

Name _____
Last First Middle Maiden Name/Alias

Present Address: Street _____
City _____ State _____ Zip Code _____

Home Phone: _____ Alternate Phone # _____

Position for which this application is being made: _____

Social Security Number _____ Date of Birth _____

Driver's License Number _____ State _____

List the name, location and dates of attendance with respect to the last two educational institutions in which you have been enrolled.

Name of Institutions	Date/s Attended	Degree/Diploma
1. _____		
2. _____		

Previous home addresses (if any) with applicable dates. List at least last two.

Parish Name /City _____

List all previous church and/or employment, volunteer work involving youth.

Name	Location/Address	Phone	Contact person	Type of Work	Dates
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List any gifts, training, education or other factors that have prepared you for work with children/youth.

List your employers for the past ten years.

Employer Street Address Phone Contact Person Dates of Employment

Please respond Yes or No to the following questions. Any yes answer requires a detailed explanation below.

- Yes No Have you ever had your driver's license or a professional license revoked or suspended?
- Yes No Have you been arrested/charged with driving under the influence of alcohol/other substance?
- Yes No Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?
- Yes No Is there any fact or circumstance about you or your background that would call into question the advisability of entrusting you with the supervision, guidance, and care of young people?

If you answered yes for any of the above, please explain. _____

Please furnish at least three references other than relatives or present or former employers.

Name _____ Relationship _____
Complete Address _____
Phone Number _____

Name _____ Relationship _____
Complete Address _____
Phone Number _____

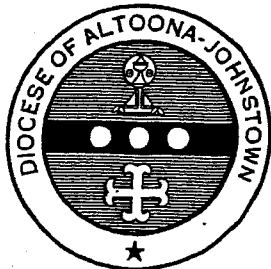
Name _____ Relationship _____
Complete Address _____
Phone Number _____

I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application or dismissal. I authorize the Diocese of Altoona-Johnstown or _____ (name of Parish/Organization) to conduct personal, professional, criminal record and child abuse background check. I realize that the criminal record check may be conducted by the Diocese of Altoona-Johnstown or _____ (name of parish/organization) or I may be asked to furnish it. I hereby release and agree to hold harmless from liability any person or organization that provides information to the Diocese of Altoona-Johnstown and/or _____ (name of parish/organization) and the employees, officers and directors of the Diocese of Altoona-Johnstown and/or _____ (name of parish/organization) or any authorized representative of the same as a result of this application.

My signature indicates that I have read and understood the above statement and am signing below of my own free will.

Signature of Applicant _____ Date _____

Printed Name _____



Diocese of Altoona-Johnstown
Children & Youth Protection and Advocacy Office
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Lilly, PA 15938
814-886-8250
Fax 814-886-7758
srmarilyn@dioceseaj.org

Employee/Volunteer's Code of Conduct

Our children are the most important gifts God has entrusted to us. As a volunteer, I promise to strictly follow the rules and guidelines in this Volunteer's Code of Conduct as a condition of my providing services to the children and youth of _____.

As an employee/volunteer, I will:

- Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration.
- Avoid situations where I am alone with children and/or youth at Church activities.
- Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.
- Refuse to accept expensive gifts from children and/or youth or their parents without prior written approval from the pastor or administrator.
- Refrain from giving expensive gifts to children and/or youth without prior written approval from the parents or guardian and the pastor or administrator.
- Report suspected abuse to the pastor, administrator, or appropriate supervisor and the Department of Public Welfare or Childline. I understand that failure to report suspected abuse to civil authorities is, according to the law, a misdemeanor.
- Cooperate fully in any investigation of abuse of children and/or youth.

As a volunteer, I will not:

- Smoke or use tobacco products in the presence of children and/or youth.
- Use, possess, or be under the influence of alcohol at any time while volunteering.
- Use, possess, or be under the influence of illegal drugs at any time.
- Pose any health risk to children and/or youth (i.e., no fevers or other contagious situations).
- Strike, spank, shake, or slap children and/or youth.
- Humiliate, ridicule, threaten, or degrade children and/or youth.
- Touch a child and/or youth in a sexual or other inappropriate manner.
- Use any discipline that frightens or humiliates children and/or youth.
- Use profanity in the presence of children and/or youth.

I understand that as an employee/volunteer working with children and/or youth, I am subject to a thorough background check including criminal history. I understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in my dismissal as an employee or removal as a volunteer with children and/or youth.

_____ Employee/Volunteer's Printed Name

_____ Employee/Volunteer's Signature

_____ Date



Diocese of Altoona-Johnstown
Verification of Appropriateness for Ministry

Employee/Volunteer Name _____
How long have you known this individual? _____

In what capacity have you known this individual? _____

Describe this individual's reliability and willingness to continue his/her commitment.

Answer yes or no to the following questions. If you answer yes to any question/s, please explain in detail on the reverse side.

- Yes No Are you aware of any problems that would limit the individual's ability to fulfill this obligation?
- Yes No Are you aware of any problems or concerns that should limit or preclude this individual from working with children and/or youth? If yes, please explain.
- Yes No Are you aware of any instance in which the individual's driver's license or other professional license was revoked or suspended?
- Yes No Are you aware whether this individual has ever been arrested or charged with driving under the influence?
- Yes No Are you aware whether this individual has ever been charged or arrested for sexual misconduct with minors?
- Yes No Is there any fact or circumstance about the individual's background that would call into question the advisability of entrusting the individual with the supervision, guidance, and care of children and young people?
- Yes No Are you aware of any other information that would bear upon the appropriateness of the individual's involvement in Church activities?

Are you willing to validate this individual's appropriateness for continued ministry?
Yes _____ No _____

If No, why not?

Date _____

Signature _____

Printed Name _____

**RETURN THIS FORM TO ST. ROSE OF LIMA SCHOOL WITH
PAYMENT OF \$12.00 FOR ONLINE BACKGROUND CHECK
(RENEWABLE EVERY 3 YEARS)**

Today's Date _____

Name _____

Date of Protecting God's Children Class _____

Where class was taken _____

Amount enclosed _____

Checks payable to "St. Rose of Lima School"