

**Safe Environment Program
Background Evaluation & Safe Environment Education
FINAL Report-Parish/Grade School
July 1, 2013-June 30, 2014**

Parish/school name _____

City _____

Report for: ___ school
 ___ parish staff
 ___ other (_____)
Check all that apply.

	A Total number	B Number educated	C Number remaining to receive education	D Number with completed background checks	E Number with background checks to be completed
1. Educators <i>(school use only)</i>					
2. Parish/school employees					
3. Volunteers/ Others					

****For every row above, check that Column A = column B + column C = column D + column E***

Please explain any number in columns C or E that is not zero.

Please attach alphabetical list of names per instruction #5. Next to the employee's name, please list the date of the most recent background screening.

Form completed by: _____ Date: _____

Position: _____

Telephone: _____ e mail: _____

By signing below, I acknowledge the numbers above are accurate for my parish and/or school. I also affirm that our parish and/or school have received the diocesan safe environment program and have implemented it as documented above.

Pastor's signature: _____ Date: _____

Principal's signature: (if applicable) _____ Date: _____

FORM 2-PAR/SCH

FINAL

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INSTRUCTIONS FOR COMPLETING THE CHART

Time period -- July 1, 2013–June 30, 2014

1. Begin with the preliminary report (FORM 1) from your parish/ school and the notes that were returned to you by the safe environment coordinator.
2. Address all issues mentioned in the notes, for example, outstanding background checks or training and any persons found on the business office report that might need to be added to the report.
3. Add in to your report any new employee hired or new volunteer to your parish or school since FORM 1 was completed.
4. Complete the chart per the directions given for FORM 1.
5. Attach ONE alphabetical list of all employees that are included in this report due to steps 2 and 3. List the date of their most recent background check by their name.
6. Review with the pastor and principal (if applicable) and obtain signatures.
7. Return to the safe environment coordinator by June 30, 2014.

For every row, check that column A = column B + column C = column D + column E

Please call Cathie Cicchiello or send a note if you have any questions before you complete the form!

260-672-1510

ccicchiello@diocesefwsb.org

Complete and return FORM 1 by June 30, 2014 by any of the methods below:

**US Mail: Cathie Cicchiello
Safe Environment Coordinator
PO Box 390
Fort Wayne, IN 46801**

**FAX report to: Cathie Cicchiello
Safe Environment Coordinator
260-483-1881**

Scan and attach to email: ccicchiello@diocesefwsb.org

THANK YOU VERY MUCH!