

**APPENDIX IV.  
PARISH ANNUAL FORMS  
PARISH SAFE ENVIRONMENT VERIFICATION**

**This form indicates the status of the Safe/Sacred Environment Formation Program for your Parish for the present Catechetical year. It confirms that the *POLICY AND PROCEDURES FROM THE PROTECTION OF MINORS AND/OR VULNERABLE ADULTS* has been fulfilled by your Parish.**

**Please initial your response that Safe Environment Formation has been presented to the following groups or not presented to the following groups during this current Catechetical year:**

Children (Pre-School through Grade 5)	_____ Yes	_____ No	_____ N/A
Youth (Grade 6 through Grade 12)	_____ Yes	_____ No	_____ N/A
Catechists and Volunteers	_____ Yes	_____ No	_____ N/A
Employees (If directly serving Minors)	_____ Yes	_____ No	_____ N/A
Opt-out Form for Parents	_____ Yes	_____ No	_____ N/A

**PLEASE CHECK ONE:**

\_\_\_\_\_ Safe Environment Formation occurred as required for all groups listed above in order to effectively provide a safe environment within our Church for children and youth.

\_\_\_\_\_ Safe Environment Formation did not occur in one or more of the required groups listed above in this current Catechetical year, although Safe Environment Formation has been implemented in previous years. Our parish has a plan to provide the Safe Environment Formation by \_\_\_\_\_

**Parish:** \_\_\_\_\_ **Pastor signature:** \_\_\_\_\_

**Safe Environment Coordinator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return all forms by December 1<sup>st</sup> of this Catechetical year to this Eparchial Pastoral Center, Safe Environment Co-ordinator. God Bless you!**

**BYZANTINE CATHOLIC EPARCHY OF PHOENIX**  
Pastoral Center - 8105 North 16th Street - Phoenix, AZ 85020  
Phone: (602) 861-9778 Fax: (602) 861-9796

***Consumer Authorization***

*Mail completed form to: Patrick Cullen, 8105 N. 16<sup>th</sup> Street, Phoenix, AZ 85020*

**CONSENT FORM FOR BACKGROUND CHECK**

I, \_\_\_\_\_, hereby authorize the Eparchy of Phoenix and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment with the Eparchy of Van Nuys.

I release the Eparchy of Phoenix and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

---

***Full Name (Printed)***

---

***Maiden Name or Other Names Used***

---

***Present Address – How Long?***

---

***City/State/Country/Zip***

***Phone***

***Email***

---

*Former Address – How Long?*

---

*Date of Birth*

---

*Parish*

---

*Social Security Number*

---

**Signature**

---

**Date**

*Note: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. The Eparchy of Phoenix is an Equal Opportunity Employer; and does not discriminate on the basis of Sex, Race, Religion, Age (40 and over), Handicap, or National Origin.*

**I have also read the *Eparchy of Phoenix Code of Pastoral Conduct*. I have retained the copy of this document for my records, and I agree to follow it.**

---

*Signature*

**2. Safe Environment Formation Program for Parish/Eparchial Employees, Parents and/or Volunteers**

**Parish:** \_\_\_\_\_

**Pastor:** \_\_\_\_\_

**Program Facilitator:** \_\_\_\_\_

**Name of the Program Offered:** \_\_\_\_\_

**Date of the Program Offered:** \_\_\_\_\_

**Signatures of Attendees of the Program:**

*Print*

*Signature*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 3. Safe Environment Questionnaire Follow-up to Formation

**Volunteers, as a follow-up to your Safe Environment Formation, please complete this questionnaire on creating a safe environment. Return this questionnaire to your Pastor or Parish Safe Environment Coordinator.**

**1. As a volunteer, do you fully understand the eparchy's policy and code of conduct and the church's role in creating a safe environment? If not, what do you need clarified?**

**2. Are you aware of your responsibilities in reporting misconduct?**

**3. Do you know the process for reporting misconduct?**

**4. If you are a Catechist, are you using the lesson plans provided for the teaching of Safe Environment Formation?**

**5. How are you supported in your parish in creating a safe environment?**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parish** \_\_\_\_\_ **City** \_\_\_\_\_

**4. Safe Environment Formation for Minors of the Parish**

**Parish:**\_\_\_\_\_ **Pastor:**\_\_\_\_\_

**Date of the Formation for Minors:**\_\_\_\_\_

<b>NAME OF THE CATECHIST</b>	<b>GRADE LEVEL</b>	<b>NO. OF MINORS</b>
------------------------------	--------------------	----------------------

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total Number of Minors Attending Safe Environment Formation Classes:**\_\_\_\_\_

**Signature of Pastor or Parish Safe Environment Coordinator:**

\_\_\_\_\_ **Date:**\_\_\_\_\_

**5. Parent Safe Environment Formation Program Opt-out Form**

We, the undersigned are aware that in accord with the Charter for the Protection of Children and Young People, mandate that each Parish are to offer Safe Environment Formation for employees and volunteers, and in an age appropriate manner, to the minors of the Parish.

As parents we acknowledge our role as the primary educators of our children. We have opted this year to instruct our children in these matters in a manner that we determine as necessary and appropriate to protect our minors from crimes of sexual harrassment and molestation.

Materials from our Parish through the Eparchy of Phoenix concerning the principles of Safe Environment were offered to and received by us.

**Parent Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Signature:* \_\_\_\_\_

*Printed Name:* \_\_\_\_\_

*Names of Minors instructed by parents and/or guardians:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Please return this form to your Pastor or to the Safe Environment Coordinator of your Parish by December 1<sup>st</sup>.***