

Documentation for Safe Environment Representing Adults
(Articles 12 and 13 of the *Charter for the Protection of Children and Young People*)

Name of Parish/School/Diocesan Affiliated Organization: _____

Address/City/Zip Code: _____

For the Fiscal Year Ended June 30, 20__

Provide the number of persons in each category:

- To the extent possible, if persons belong in more than one category, count them in their primary category (e.g. educators who are also parents should be counted as educators; catechists who are also employees should be counted as employees).
- **Note:** Do NOT include priests and deacons in your count; these numbers will be obtained directly from the Diocese of Honolulu's Office of Clergy.

Definitions:

Educators – salaried teachers in diocesan and parish schools (include principals and administrators).

Parish Employees – paid persons (other than priests/deacons) who are employed by and work directly for parishes, including but not limited to parish ministers, rectory personnel, bookkeeper, etc.

School Employees – paid persons (other than teachers/principals and administrators) who are employed by and work directly for schools, including but not limited to school support staff, cafeteria staff, etc.

Diocesan Affiliated Employees – paid persons who are employed by and work directly for the diocesan affiliated organization such as Directors, Chairpersons, President, etc.

Volunteers/Others – non-paid persons whose duties include contact with minors, who assist the parish/school/diocesan affiliated organization, including but not limited to catechists, youth ministers, coaches, etc.

PARISHES

	Total Number	Of Total Number, How Many Have Completed Background Screening?	Completion Date for Those <i>not</i> Background Screened	Of Total Number, How Many have completed Safe Environment Training?	Completion Date for those <i>not</i> Safe Environment Trained
PARISH					
Parish Employees <i>(part & full-time)</i>					
Volunteers/Others <i>(whose duties include contact with minors)</i>					
PARISH	Use the space below to explain any gaps between the total numbers and the numbers remaining to be trained and/or complete background screening.				
Parish Employees <i>(part & full-time)</i>					
Volunteers/Others <i>(whose duties include contact with minors)</i>					

SCHOOLS

	Total Number	Of Total Number, How Many Have Completed Background Screening?	Completion Date for Those <i>not</i> Background Screened	Of Total Number, How Many have completed Safe Environment Training?	Completion Date for those <i>not</i> Safe Environment Trained
SCHOOL					
Educators <i>(part & full-time)</i>					
School Employees <i>(part & full-time)</i>					
Volunteers/Others <i>(whose duties include contact with minors)</i>					
SCHOOL	Use the space below to explain any gaps between the total numbers and the numbers remaining to be trained and/or complete background screening.				
Educators <i>(part & full-time)</i>					
School Employees <i>(part & full-time)</i>					
Volunteers/Others <i>(whose duties include contact with minors)</i>					

DIOCESAN AFFILIATES

	Total Number	Of Total Number, How Many Have Completed Background Screening?	Completion Date for Those <i>not</i> Background Screened	Of Total Number, How Many have completed Safe Environment Training?	Completion Date for those <i>not</i> Safe Environment Trained and/or Background Screened
DIOCESAN AFFILIATE					
Diocesan Affiliate Employees <i>(part & full-time)</i>					
Volunteers/Others <i>(whose duties include contact with minors)</i>					
DIOCESAN AFFILIATE	Use the space below to explain any gaps between the total numbers and the numbers remaining to be trained and/or complete background screening.				
Diocesan Affiliate Employees <i>(part & full-time)</i>					
Volunteers/Others <i>(whose duties include contact with minors)</i>					

I certify that the parish/school/diocesan affiliated organization has implemented the diocesan safe environment program and that the information reported here is accurate.

Name of person completing this form *(please print clearly)*: _____ Title: _____

Signature: _____ Date: _____

Phone Number: _____ Email: _____

Name of Pastor or Principal *(please print clearly)*: _____ Title: _____

Signature: _____ Date: _____

Required for Parishes and Schools