

APPROVAL

FOR ADMINISTRATOR USE ONLY

Request to serve as a volunteer: Approved Denied

Approved Ministry ████████████████████
Dept. ID

Start Date ____/____/____ Supervisor _____

Conditions: _____

Request Approved by: _____
Signature Date

Print Signer's Name and Title

PLEASE READ THE FOLLOWING CAREFULLY UPON APPROVAL OF YOUR REQUEST

1. I have read this entire form. I understand and agree to all of its contents. I certify that all answers given on this form are true and complete to the best of my knowledge, and I understand that falsification in any detail is grounds for disqualification from further consideration or for dismissal from any volunteer role with a parish, school or other entity.
2. I agree to inform the parish, school or other entity of any changes to the foregoing information.
3. I acknowledge receipt of the Diocesan Child Protection Policy, agree to read it and be responsible to follow the policies and procedures it contains.
4. I understand that I must comply with the policies, rules and precepts of the entity I serve.

Date Signature of Volunteer

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- | | |
|---|---|
| <input type="checkbox"/> Screening Form Completed | <input type="checkbox"/> Child Protection Policy Provided |
| <input type="checkbox"/> Volunteer Entered into PayForce Database | <input type="checkbox"/> Screening Registered |

VIRTUS Training Scheduled: _____ **VIRTUS** Training Occurred: _____

Notes: _____