

APPENDIX 9
AUTHORIZATION AND VERIFICATION FORM

I hereby attest and certify that I have never been convicted of nor pled guilty to: any offense specified in Ohio Revised Code section 109.572 (A)(1)(a), including but not limited to; contributing to unruliness or delinquency of a child (2919.24); unlawful sexual conduct with a minor (2907.04); gross sexual imposition (2907.05); sexual imposition (2907.06); importuning (2907.07); voyeurism (2907.08); public indecency (2907.09); pandering obscenity involving a minor (2907.321); pandering sexually oriented matter involving a minor (2907.322); illegal use of minor in nudity-oriented material or performance (2907.323); any offense of violence, or any existing or former offense of any municipal corporation, this state, any other state of the United States that is substantially equivalent to any of the above offenses. I further certify that I have never been discharged from employment or a volunteer position because of any activity covered by the foregoing statutes.

If you have been convicted or pled guilty to any of the above offenses, or any offenses listed in The Ohio Revised Code section 109.572 (A)(1)(a) (Appendix 3), *or any criminal offense*, please list the crime and explain the circumstances thereof below or on a separate sheet.

I hereby authorize any present or former employer, person, firm, corporation or government agency to answer any and all questions and to release or provide any information within their knowledge or records. With regard to my medical and/or psychological records, I authorize any physician or health care provider to release any information pertaining to my involvement in child abuse or sexual exploitation of other persons, including children. I agree to hold any and all persons harmless and free of any liability for releasing any information that is within their knowledge and records.

I further authorize the Diocese of Youngstown to conduct a background check of criminal records and agree that, if required, I will provide my fingerprints for this purpose, and that I will fully cooperate in providing all information and signing all documents necessary to conduct such a check, and that the results of these background checks will be made known to the necessary personnel at the parish, school, and/or institution where I will serve and to the Safe Environment Office of the Diocese of Youngstown.

1. Have you ever abused or sexually exploited a child or vulnerable adult?
Yes _____ No _____
2. Has any civil or criminal complaint or any other written complaint ever been made against you relating to child or vulnerable adult abuse or exploitation?
Yes _____ No _____
3. Have you ever been arrested or convicted for any crime (please list the crime(s) and explain the circumstances thereof below or on a separate sheet)?
Yes _____ No _____
4. Have you ever terminated your employment or volunteer service or had your employment or volunteer service terminated for reasons relating to allegations or civil or criminal complaints of child or vulnerable adult abuse or exploitation against you?
Yes _____ No _____
5. Have you ever received any medical or psychological treatment, including counseling, involving your abuse of children or sexual exploitation of other persons including children?
Yes _____ No _____

If you answer "yes" to any of the above five questions please provide additional information below or on a separate sheet. If you have additional questions contact the Safe Environment Coordinator at 330-744-8451.

I hereby attest and certify that the above information provided by me is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may disqualify my application or result in my immediate dismissal.

Signature: _____ Date: _____

Print Name: _____ Witness: _____

(Witness signature is required for validity; the witness can be anyone.)

ACKNOWLEDGEMENT FORM

I hereby acknowledge that I have received, or was given access to, a physical or electronic copy of the *Safe Environment Policy* of the Catholic Diocese of Youngstown and that I have read it, understand its meaning, and agree to conduct myself in accordance with the policy. I have also personally read and completed the Authorization and Verification Form (Appendix 9).

I understand that if I am an employee of a parish, school, or institution in the Catholic Diocese of Youngstown, or if I am a volunteer that works with children or vulnerable adults for a parish, school, or institution of the Catholic Diocese of Youngstown, I am required to submit a background check of criminal records, which may require me to provide my fingerprints through the Webcheck process in order to receive a background check through the Ohio and/or Federal Bureau of Criminal Identification and Investigation, and that I will fully cooperate in providing all information and signing all documents necessary to conduct any required background check of criminal records, and that I am required to participate in the VIRTUS in-service training, *Protecting God's Children*.

Signature: _____ Date: _____

Print Name: _____

Date of Birth: _____

Address: _____

Email Address: _____ Phone: _____

Parish/School/Institution (and city): _____

Position or Ministry: _____

As noted above, if you have been convicted of or pled guilty to any criminal offense that would appear on a background check, please list the crime(s) and explain the circumstances thereof below or on a separate sheet.

**When complete, please submit Appendix 9 to the safe environment
Compliance Officer at your location of service.**