

**Annual Parish Compliance Audit - Diocese of Springfield in Illinois  
Charter for the Protection of Children and Young People**

**Audit Period: July 1, 2019 through June 30, 2020**

**Parish/School:**

**City:**

**Pastor:**

**Mailing Address:**

**Instructions:**

1. Please distribute the audit sections included in this report for completion as indicated below.
2. The audit document may also be downloaded on the diocese website at [www.dio.org](http://www.dio.org); go to Safe Environment link and click on Parish Audit.
3. An explanation must accompany the audit for any applicable sections not completed.
4. **DUE DATE** - Return completed audits to the **Office for Safe Environment** no later than **May 31, 2020**
5. Please **contact Safe Environment Director** if the audit will not be completed by May 31, 2020.

**AUDIT SECTION**

**AUDIT REPORTING**

**COMPLETED BY:**

**Section 1**

Pages 2,3,4,5 & 6

Reporting on elementary school student's personal safety training, educators, school staff and school volunteers

**Parish Safe Environment Coordinator & School principal**

**Section 2**

Pages 7, 8, 9, 10 & 11

Reporting on parish religious education program student personal safety training and volunteers

**Parish Safe Environment Coordinator & Directors of Religious Education or Coordinators of Religious Education**

**Section 3**

Page 12 & 13

Reporting on parish staff & parish volunteers

**Parish Safe Environment Coordinator**

**Section 4**

Pages 14 & 15

Reporting on other parish safe environment requirements, training compliance letter

**Parish Safe Environment Coordinator & Parish Pastor, Parochial Administrator or Parish Life Coordinator.**

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 1, 2, 3 and 4 of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.

School:

<b>Section 1</b>
Pages 3, 4, 5 & 6

**Reporting on Elementary School Students Personal Safety Training,  
Educators, School Staff & School Volunteers**

**Audit Period July 1, 2019 through June 30, 2020**

**Instructions**

1. Pages 3, 4, 5 and 6 of Section 1 are completed annually as a part of the **Annual Parish Safe Environment Compliance Audit** for the **Diocese of Springfield in Illinois**. This audit instrument is to be completed by the School Principal for the Elementary school noted at the top of the page. This audit instrument will aid in maintaining school and diocesan compliance with the United States Conference of Catholic Bishops Charter for the Protection of Children and Young People. Please follow the instructions for completion.
2. Principal complete the contact information below and provide a contact number and email address.

<b>Contact Name:</b>	
<b>Telephone #:</b>	<b>Email Address:</b>

3. The information requested in this audit instrument mirrors the USCCB Audit Instrument Article 12 (Safe Environment Training), and Article 13 (Background checks) completed each year by the diocese.
4. Completion of Section 1 of the annual parish safe environment audit is **due by May 31, 2020**. Completed audits should be forwarded to the Office for Safe Environment. The audit can be faxed, emailed or mailed using the contact information listed below. If for some reason you do not feel that you will be able to complete the audit report by that date, please contact the safe environment director.

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 1, of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.

School:

**Section 1**

**Reporting on Elementary School Students Personal Safety Training, Educators, School Staff** – Any other person employed and working in the school (cooks, maintenance, office staff, nurse, etc.). Please complete A – G

**1. Was Virtus® Touching Safety presented to students in the audit period?**

- Yes**    **No** If no please attach a written explanation describing the reason why personal safety Training was not conducted.
- Training Conducted but did not use Virtus® Touching Safety.** Please provide the name of the training method used and why \_\_\_\_\_

Please complete 1A-1G regarding the student attendance of the personal safety training.

		Enter 2020 Response Here	Reported 2019
A.	# of Students Enrolled		
B.	# of Students Trained		
C.	Students absent Due to Parent Non-Permission or OPT OUT		
D.	Students Absent Due to Parent Non-Responding to Permission		
E.	Students Absent for any other reason		
F.	Total of, 1C, 1D, 1E above		
G.	Of the students in 1C, 1D and 1E above report the number of students that have not attended personal safety training in past years and remain to be trained.		

**2. Was parent permission obtained for the Personal Safety Training?**

- Yes.** Please check the method below that best describes how parent permission is obtained or provide an explanation in of the method used.
- No.** Please provide an explanation below. **\*\*ATTACH A COPY PERMISSION OR OPT OUT FORM TO THIS AUDIT WHEN SUBMITTING**

Check	Parent Permission Method	Instructions
A. <input type="checkbox"/>	Written permission slips requested from the parent at the time of PST	Please answer 1) – 8) in 2A and attach a sample copy of the permission slip
B. <input type="checkbox"/>	B. Parents informed of the PST training curriculum during student registration when permission slips are signed.	Please answer 1) – 8) in 2A. and attach a copy of the information detailing the personal safety program and a sample copy of the permission slip.
C. <input type="checkbox"/>	C. Parent permission is in the form of an “Opt Out”. The program is described at registration or at the time of the training and parents are informed to complete the “opt out” slip if they do not want the child to participate in the PST training. <b>VIRTUS BOOKLET MUST BE GIVEN</b>	Please answer 1), 3) & 8) in 2A and attach a copy of the information detailing the personal safety program and the opt out form.
D. <input type="checkbox"/>	Other	Please explain below

**Explain** \_\_\_\_\_

School:

**Section 1**

**Reporting on Elementary School Students Personal Safety Training, Educators, School Staff** – Any other person employed and working in the school (cooks, maintenance, office staff, nurse, paid coaches, etc.). Please complete A – G

2A	Reporting on Parent Permission at the Elementary School	Enter 2020 Response Here	Reported 2019
1)	Enter # of parents per student(s) enrollment (Count 1 parent per student i.e., mother & father as 1. Count 1 parent for any number of siblings) <b>Answer required from all schools.</b>		
2)	Enter # of permission forms returned from parents		
3)	Enter # of parents choosing non-permission. (includes permission or opt out forms) Regardless of the method of training this statement must be answered by all schools <b>Answer required from all schools.</b>		
4)	Enter # of handbooks given to parents choosing non-permission in number 3) above. Also enter # of parents in 3) that received handbooks in previous years. <b>Answer required from all schools.</b>		
5)	Enter # of parents that did not respond (includes parents that refused to sign the form one way or another)		
6)	Indicate by checking <b>Yes</b> or <b>No</b> if the School or PSR program maintains a written record of the parents that did not respond from one school year to the next school year.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7)	Indicate by checking <b>Yes</b> or <b>No</b> if all parent permission forms are retained on file @ the school for two years from the date received.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8)	Indicate by checking <b>Yes</b> or <b>No</b> if all parent non-permission and Opt Out forms are retained on file @ the school for two years from the date received.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**3. Educators** – Active salaried teachers in diocesan and parish schools. Includes substitute teachers for the school year. (***Does not include PSR teacher***) Please complete A – G.

Educators	Audit Inquiry	Enter 2020 Response Here	Reported 2019
A	Total number of Educators and Substitute Teachers employed at the school during the audit period		
Provide an explanation for any increase/decrease in the total count in A above from last audit:			
B	Number of the Total Completing PGC Training		
C	<b>Subtract 3B from 3A and enter the total remaining to be trained</b>		
D	For those not trained enter date by which training will be completed		
E	Of the educators reported above report the number that have completed ISP / FBI Fingerprint Criminal History Check		
F	<b>Subtract 3E from 3A and enter the total remaining to be background checked</b>		
G	Date by which the fingerprint check will be completed		

School:

**Section 1**

**Reporting on Elementary School Students Personal Safety Training, Educators, School Staff** – Any other person employed and working in the school (cooks, maintenance, office staff, nurse, etc.). Please complete A – G

School Staff	Audit Inquiry	Enter 2020 Response Here	Reported 2019
A	Total number of paid school staff employed at the school during the audit period		
Provide an explanation for any increase/decrease in the total count in A above from last audit:			
B	Number Completing PGC Training		
C	<b>Subtract 3B from 3A and enter the total remaining to be trained</b>		
D	For those not trained enter date by which training will be completed		
E	Of the school staff reported above report the number that have completed ISP / FBI Fingerprint Criminal History Check		
F	<b>Subtract 3E from 3A and enter the total remaining to be background checked</b>		
G	Date by which the fingerprint check will be completed		

**5. School Volunteers** – All active non-salaried persons who assist the school as a volunteer working in a child-based program non-paid coaches, children’s programs, field trips, lunch room, teachers aid, etc. Please complete A – G.

Volunteers	Audit Inquiry	Enter 2020 Response Here	Reported 2019
A	Total number of volunteers. <i>Enter total number assisting as a volunteer in a child-based programs for PSR, School if applicable, and parish.</i>		
B	Number Completing PGC Training		
C	<b>Subtract 3B from 3A and enter the total remaining to be trained</b>		
D	For those not trained enter date by which training will be completed		
E	Of the volunteers reported above report the number that have completed a Criminal History Check and are not expired		
F	<b>Subtract 3E from 3A and enter the total remaining to be background checked</b>		
G	For those remaining to be background checked in F, how many are re-checks that need to be conducted?		
H	Date by which the Criminal History Check will be completed		

**Use the space below, (or attach a separate sheet) to explain any gaps between the total numbers and the numbers remaining to be trained or background checked and how the school is planning on closing those gaps.**

School:

**Section 1**

**Reporting on Elementary School Students Personal Safety Training, Educators, School Staff & School Volunteers**

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

**RE: Elementary School Principal Training Compliance Letter**

**Audit Period: July 1, 2019 through June 30, 2020**

TO: Most Reverend Thomas John Paprocki:

The above referenced elementary school in the Diocese of Springfield in Illinois has received and implemented all aspects of the diocese's Safe Environment Training Program.

The program includes training of every required group, (*applicable to this school environment*): students, volunteers, parents, educators and employees in programs that provide adults with the steps necessary to create an environment safe from child sexual abuse and to give children enrolled in our schools the knowledge they need to stay safe.

←(Signature required at left)

\_\_\_\_\_  
Principal

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 1 of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.

Parish:

<b>Section 2</b>
Pages 7, 8, 9, 10 & 11

**Reporting on Religious Education Program Student Personal Safety Training and Volunteers working in the Religious Education Programs**

**Audit Period July 1, 2019 through June 30, 2020**

**Instructions**

- Pages 7, 8, 9, 10 & 11 of Section 2 are completed annually as a part of the **Annual Parish Safe Environment Compliance Audit** for the **Diocese of Springfield in Illinois**. This audit instrument is to be completed by the Director of Religious Education or the Coordinator of Religious Education for the parish or parishes noted at the top of the page. This audit instrument will aid in maintaining school and diocesan compliance with the United States Conference of Catholic Bishops Charter for the Protection of Children and Young People. Please follow the instructions for completion.
- Please list the DRE or CRE below responsible for completing the audit information as well as a contact number and email address where the person can be reached.

<b>Contact Name:</b>	
<b>Telephone #:</b>	<b>Email Address:</b>

- The information requested in this audit instrument mirrors the USCCB Audit Instrument Article 12 (Safe Environment Training), and Article 13 (Background checks) completed each year by the diocese.
- The completed Section 2 of the annual parish safe environment audit is **due by May 31, 2020**. Completed audits should be forwarded to the Office for Safe Environment. The audit can be faxed, emailed or mailed using the contact information listed below. If for some reason you do not feel that you will be able to complete the audit report by that date, please contact the safe environment director.

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 2, 3 and 4 of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.

**Parish:**

**Section 2**

**Reporting on Religious Education Program Student Personal Safety Training and Volunteers working in the Religious Education Programs**

1.. Our records indicate directs the following additional parishes.

Parish, City

2. Please indicate if the information in this audit section will include the reporting parishes listed above?
- Yes Include all statistics and answer all questions for the parishes listed above in this report.
- No If no, please indicate below the parishes not included in the reporting for this audit section and complete and submit a separate audit reporting for any parish listed in this section.

Parish	City

**Definition of Students** - includes all students (*through high school*) enrolled in diocesan schools and/or religious education classes for the period of the Audit Report. Also includes students home schooled. (*Youth ministry programs are not included in this audit report*)

3.  **Check this box if no PSR program exists for the reporting parish. No other information is needed. Please return Section 2 according to the return instructions listed at the bottom of this page**
4.  **Check this box if children of this parish are enrolled in a religious education program at another Parish and enter below the name and location of the parish conducting the training. No other information is needed. Please return section 2 according to the return instructions listed at the bottom of this page.**

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5. **If check box explanations in 3 & 4 above, do not apply please continue to fully complete Section 2 item numbers 6- 9.**



Parish:

**Section 2**

**Reporting on Religious Education Program Student Personal Safety Training and Volunteers working in the Religious Education Programs**

6. Please complete A – J regarding the student attendance of the personal safety conducted in the PSR classroom. (If public school provides instruction please proceed to item #7).

		Enter 2020 Response Here	Reported 2019
A.	# of Students Enrolled in the Parish PSR Program		
B.	# of Students Trained		
C.	Students absent Due to Parent Non-Permission or OPT-OUT		
D.	Students Absent Due to Parent Non-Responding to Permission		
E.	Students Absent for any other reason		
F.	<b>Total of 1C, 1D, 1E above</b>		
G.	<b>Of the students in 1C, 1D and 1E above report the number of students that have not attended personal safety training in past years and remain to be trained.</b>		
H..	<b>Training Method Used in the PSR Setting</b>	<b>(Check all that apply)</b>	
	<b>Training Program used 2019-2020</b>		
	<b>Virtus® Touching Safety Program</b>		
	<b>Diocesan provided age appropriate personal safety training videos</b>		
	<b>ICASA Prevention Educator</b>		
	<b>Child Lures Program</b>		
	<b>Other – Please name the program below and attach a description of the program to this audit report</b>		

7. **Public School Provides Personal Safety Training Instruction** - If PSR students receive instruction in the public school and the program has been **approved by the diocese as an appropriate method of instruction** please complete A – C.

		Enter 2020 Response Here	Reported 2019
A.	# of Students Enrolled in the Parish PSR Program		
B.	# of Students Trained with an authorized program in the Public School		
C.	<b>Requires written verification (letter or description of instruction material) identifying the school or school system for which the program is used, the training program name and content and signed by a school official (principal or district office official) be attached to the audit.</b>	<input type="checkbox"/> Attached	

Parish:

**Section 2**

**Reporting on Religious Education Program Student Personal Safety Training and Volunteers working in the Religious Education Programs**

**8. Was parent permission obtained for the Personal Safety Training?**

**Yes.** Please check the method below that best describes how parent permission is obtained **or** provide an explanation in of the method used.

**No.** Please provide an explanation in below. **PLEASE ATTACH SAMPLE PERMISSION FORM YOU USE**

Check	Parent Permission Method	Instructions
A. <input type="checkbox"/>	Written permission slips requested from the parent at the time of PST	Please answer 1) – 8) in 2A and attach a sample copy of the permission slip
B. <input type="checkbox"/>	B. Parents informed of the PST training curriculum during student registration when permission slips are signed.	Please answer 1) – 8) in 2A. and attach a copy of the information detailing the personal safety program and a sample copy of the permission slip.
C. <input type="checkbox"/>	C. Parent permission is in the form of an “Opt Out”. The program is described at registration or at the time of the training and parents are informed to complete the “opt out” slip if they <u>do not</u> want the child to participate in the PST training.	Please answer 1), 3) & 8) in 2A and attach a copy of the information detailing the personal safety program and the opt out form.
D. <input type="checkbox"/>	Other	Please explain below

**Explain** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8E.	Reporting on Parent Permission in the PSR Program	Enter 2020 Response Here	Reported 2019
1)	Enter # of parents per student(s) enrollment (Count 1 parent per student i.e., mother & father as 1. Count 1 parent for any number of siblings) <b>Answer required from all schools.</b>		
2)	Enter # of permission forms returned from parents		
3)	Enter # of parents choosing non-permission. (includes permission or opt out forms) Regardless of the method of training this statement must be answered by all schools <b>Answer required from all schools.</b>		

Parish:

**Section 2**

**Reporting on Religious Education Program Student Personal Safety Training and Volunteers working in the Religious Education Programs**

		Enter 2020 Response Here	Reported 2019
4)	Enter # of handbooks given to parents choosing non-permission in number 3) above. Also enter # of parents in 3) that received handbooks in previous years. <b>Answer required from all schools.</b>		
5)	Enter # of parents that did not respond (includes parents that refused to sign the form one way or another)		
6)	Indicate by checking <b>Yes</b> or <b>No</b> if the School or PSR program maintains a written record of the parents that did not respond from one school year to the next school year.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7)	Indicate by checking <b>Yes</b> or <b>No</b> if all parent permission forms are retained on file @ the school for two years from the date received.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8)	Indicate by checking <b>Yes</b> or <b>No</b> if all parent non-permission and Opt Out forms are retained on file @ the school for two years from the date received.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Religious Education Volunteers** – All active non-salaried persons who assist the parish as a volunteer working in a child based program such as catechists, youth ministers, children’s programs, field trips, teacher’s aide, etc. Please complete A-G.

Volunteers	Audit Inquiry	Enter 2020 Response Here	Reported 2019
A.	Total number of volunteers. <i>Enter total number assisting as a volunteer in a child-based programs for PSR, School if applicable, and parish.</i>		
B.	Number Completing PGC Training		
C.	<b>Subtract 3B from 3A and enter the total remaining to be trained</b>		
D.	For those not trained enter date by which training will be completed		
E.	Of the volunteers reported above report the number that have completed a Criminal History Check and are not expired		
F.	<b>Subtract 3E from 3A and enter the total remaining to be background checked</b>		
G.	For those remaining to be background checked in F, how many are re-checks that need to be conducted?		
H.	Date by which the Criminal History Check will be completed		

**Use the space below, (or attach a separate sheet) to explain any gaps between the total numbers and the numbers remaining to be trained or background checked and how the school is planning on closing those gaps.**

Parish:

**Audit Period July 1, 2019 through June 30, 2020**

**Section 3 Reporting on Parish Staff and Parish Volunteers**

<b>Parish/School:</b>	<b>City:</b>
<b>Pastor:</b>	<b>Mailing Address:</b>

1. The individual responsible for completing the audit information for Section 3 & 4 must be listed as well as a contact number and email address where the person can be reached.

<b>Contact Name:</b>	
<b>Telephone #:</b>	<b>Email Address:</b>

2. Our records indicate 1725 S. Walnut Street directs the following additional parishes.

<b>Parish, City</b>


3. Please indicate if the information in this audit section will include the reporting parishes listed above?

Yes Include all statistics and answer all questions for the parishes listed above in this report.

No If no, please indicate the parishes not included in the reporting for this audit section and complete and submit a separate audit reporting for any parish listed in this section.

Parish	City

4. **Parish Employees** – All active paid persons, (other than priest/deacons, educators or school staff), who are employed by and work directly for parishes such as parish ministers, rectory staff, etc. Please complete A – G.

Parish Employees	Audit Inquiry	Enter 2020 Response Here	Reported 2019
A 	Total number employed at the PARISH during the audit period <b>IF THERE ARE NO PAID EMPLOYEES ON STAFF AT THE PARISH PLEASE ENTER ZERO HERE</b> and do not complete the B, C, D, E, F, & G		
Provide an explanation for any increase/decrease in the total count in A above from last audit:			
B.	Number Completing PGC Training		

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 2, 3 and 4 of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.

Parish:

**Section 3 Reporting on Parish Staff**

<b>Parish Employees</b>	<b>Audit Inquiry</b>	<b>Enter 2020 Response Here</b>	<b>Reported 2019</b>
C.	<b>Subtract 3B from 3A and enter the total remaining to be trained</b>		
D.	For those not trained enter date by which training will be completed		
E.	Of the Parish Employees reported above report the number that have completed a Criminal History Check and are not expired		
F.	<b>Subtract 3E from 3A and enter the total remaining to be background checked</b>		
G.	For those remaining to be background checked in F, how many are re-checks that need to be conducted?		
H.	Date by which the Criminal History Check will be completed		

**Use the space below, (or attach a separate sheet) to explain any gaps between the total numbers and the numbers remaining to be trained or background checked and how the school is planning on closing those gaps.**

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 2, 3 and 4 of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.

**Parish:**

**5. Parish Volunteers** – All active non-salaried persons who are 18 years and older volunteering in the parish, **in any capacity (excluding PSR and school Volunteers)** as outlined in the revised Pastoral Policy on Sexual Abuse of Minors by Church Personnel. Please complete A – G.

<b>Volunteers</b>	<b>Audit Inquiry</b>	<b>Enter 2020 Response Here</b>	<b>Reported 2019</b>
A	Total number of volunteers. <i>Enter total number assisting as a volunteer 18 years and older (excluding PSR and School Volunteers)</i>		
B	Number Completing PGC Training		
C	<b>Subtract 5B from 5A and enter the total remaining to be trained</b>		
D	For those not trained enter date by which training will be completed		
E	Of the volunteers reported above report the number that have completed a Criminal History Check and are not expired		
F	<b>Subtract 5E from 5A and enter the total remaining to be background checked</b>		
G	For those remaining to be background checked in F, how many are re-checks that need to be conducted?		
H	Date by which the Criminal History Check will be completed		
<p><b>Use the space below, (or attach a separate sheet) to explain any gaps between the total numbers and the numbers remaining to be trained or background checked and how the school is planning on closing those gaps.</b></p>			

Parish:

**Audit Period July 1, 2019 through June 30, 2020**

**Section 4**

**Reporting on Other Safe Environment Requirements & Training Compliance Letter**

1.. Our records indicate the provided mailing address directs the following additional parishes.

<b>Parish, City</b>

2. Please indicate if the information in this audit section will include the reporting parishes listed above?
- Yes Include all statistics and answer all questions for the parishes listed above in this report.
- No If no, please indicate the parishes not included in the reporting for this audit section and complete and submit a separate audit reporting for any parish listed in this section.

Parish	City


**3. Other Parish Safe Environment Requirements**

	Enter 2020 Response Here		Reported 2019
	Yes	No	
<b>A.</b> <i>Is The Policy on Working with Minors and The Policy on Sexual Abuse of Minors by Church Personnel</i> communicated to employees and volunteers?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>B.</b> Does the pastor/school principal know when and how to report an allegation of sexual abuse of a minor?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>C.</b> Does the pastor/school principal know how to obtain outreach for victims?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>D.</b> Does the pastor ensure that visiting or non-permanent clergy (e.g. weekend assistants, priests who witness marriages, perform baptisms, conduct funerals or otherwise engage in supply ministry from outside the diocese) are clergy in good standing <b>AND is that letter kept on file in your office?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>E.</b> Has the parish offered parents/other adults the opportunity to attend an education session?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>F.</b> Is there documentation on file promoting/advertising education sessions for parents/other adults?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>G.</b> Does the parish have the Victim Assistance Brochures available for those attending services at the church? <b><u>Victim Assistance Brochures must be posted in public spaces at the parish level on an ongoing basis.</u></b>	<input type="checkbox"/>	<input type="checkbox"/>	

Parish:

**Section 4**

**Reporting on Other Safe Environment Requirements & Training Compliance Letter**

	Enter 2020 Response Here		Reported 2019
	Yes	No	
H. Does the parish publish the diocese Victim Assistance Contact Information in <b>the parish bulletin and online</b> or anywhere else for the general information of parish members at least twice yearly?	<input type="checkbox"/>	<input type="checkbox"/>	
 <b>Proof of bulletin announcements required to be submitted with this audit report</b> <b>Attached</b>	<input type="checkbox"/>	<input type="checkbox"/>	
I. Is the training compliance letter appropriately signed and attached with this completed audit report?	<input type="checkbox"/>	<input type="checkbox"/>	

**RE: Training Compliance Letter**

**Audit Period: July 1, 2019 through June 30, 2020**

**Parish:**

**City:**

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

**TO:** Most Reverend Thomas John Paprocki, Bishop of Springfield in Illinois

The above referenced parish in the Diocese of Springfield in Illinois has received and implemented all aspects of the diocese’s Safe Environment Training and Background Check Policies.

The parish provides training programs that provide adults with the steps necessary to create an environment safe from child sexual abuse and provides children enrolled in our schools and/or Parish Schools of Religion the knowledge they need to stay safe. The parish also requires a background check of every required group in compliance with the *Policy on Sexual Abuse of Minors by Church Personnel*.

Sincerely in Christ,

←(Signature required at left – Check appropriate title below)

- Pastor*
- Parochial Administrator,*
- Pastoral Facilitators*
- Director of Campus Ministry*

**Questions, Contact Information and Return Instructions:** If you have any questions regarding the completion of this audit section please contact the Director of the Office for Safe Environment 217-698-8500, ext. #162. Please return completed Sections 2, 3 and 4 of this audit, and training compliance letter no later than **May 31, 2020** Office for Safe Environment, 1615 W. Washington, Springfield, IL 62702-4757 or Fax # 1-888-927-4141.