

Exhibit A

**The Presbyterian Church, Sewickley
414 Grant Street
Sewickley, PA 15143**

VOLUNTEER INFORMATION FORM

We realize that many of the questions on the Volunteer Information Form are very personal and sensitive in nature. However, this information is needed to complete our evaluation of your qualifications. Due to the sensitive nature of these questions, you may refuse to answer any questions, or you may discuss your answers in confidence with a pastor of the Church rather than answering on this form. Answering "yes" to any questions, or leaving a question unanswered will not automatically disqualify an applicant for work with children, youth, or vulnerable adults.

Name: _____

If you have ever used another name(s), please indicate the name and the time period(s)

Current Address: _____

City _____ State _____ Zip _____

How long have you lived at your current address? _____ In PA? _____

Home Phone: _____ Business Phone: _____

Sex: Male _____ Female _____ Birth Date: _____

Social Security Number: _____

Driver's License Number: _____

Place of Employment _____

Single _____ Married _____ Divorced _____ Separated _____ Widowed _____

1. Are you a member of The Presbyterian Church, Sewickley? Yes _____ No _____
2. Date you became a member: _____
3. Have you previously served, or are you presently serving, as a volunteer at any church? If so, please state the name and the address of the church, the pastor of that church, the time period(s) of your volunteer work and describe generally the nature of your volunteer work.

4. Have you previously served, or are you presently serving, as a volunteer for any civic organization? If so, please state the name and the address of that organization, the person overseeing the volunteer work, the time period(s) of your volunteer work and describe generally the nature of your volunteer work. (You may limit your answer to the last three-year period).

5. Have you ever been arrested, charged, indicted, or convicted for any criminal offense, misdemeanor, felony or crimes involving drugs or alcohol?
Yes _____ No _____

If yes, please explain. Include any DUI as well as any other adult arrests that were diverted prior to indictment or trial by some pre-trial probation alternative program.

6. Have you ever been the subject of an allegation, charge, conviction or claim of sexual abuse/misconduct?
Yes _____ No _____
7. Have you ever been subject to any disciplinary action, complaint or allegations that you violated any employer's or any organization's policy concerning sexual misconduct or the abuse of drugs or alcohol?
Yes _____ No _____ (If Yes, please explain)

8. Have you ever had your driver's license suspended or restricted for any reason?
Yes _____ No _____ (If Yes, please describe the dates and reasons for each such occurrence).

9. Do you use illegal drugs? Yes _____ No _____ (If Yes, please explain)

I understand that:

- A. All information that I have provided will be verified and by my signature below, I hereby authorize The Presbyterian Church, Sewickley, Pennsylvania to conduct whatever inquiry that it deems reasonable and necessary to verify the information that I have provided in this form. I agree to release from liability any person or organization that provides information concerning me. I do hereby agree to indemnify and hold harmless, The Presbyterian Church, Sewickley, PA, its employees, representatives and agents from any and all claims or causes of action that relate in anyway whatsoever and in any manner to the verification of or attempts to verify the information provided. Attempts to contact any such references will not be disclosed to me, and I hereby waive any right I may have to inspect any information provided about me by any person or organization identified by me on this form.
- B. By signing this form, I certify and affirm that the information I have given is true, complete and correct in all respects.
- C. I have read, understand and agree to abide by the Statement of Policies and Procedures for the Protection of Children and Youth of The Presbyterian Church, Sewickley.
- D. *(This paragraph is only applicable to persons eighteen years of age and older.)* I hereby give my permission for The Presbyterian Church, Sewickley, PA to obtain information relating to my criminal history record and to perform both a Pennsylvania child abuse history clearance and a Pennsylvania state criminal records check. If I have been a resident of other states, I hereby authorize The Presbyterian Church, Sewickley to perform child abuse and criminal records checks in those states. The criminal history record, as received from the reporting agencies, may include juvenile offenses, arrests and conviction data as well as plea bargains and deferred adjudications. I understand that this information will be used, in part, to determine my eligibility for a volunteer position with this organization. I also understand that as long as I remain as a volunteer here, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history and a procedure is available, through the Pennsylvania Department of Public Welfare and the Pennsylvania State Police for clarification, if I dispute the contents of the record as received
- E. I hereby acknowledge and agree that I will inform the Snior Pastor if I am arrested, charged, indicted, or convicted; or if allegations have been made against me, of any of the offenses listed in the Statement of Purpose and Procedure Safeguarding the Well-Being of Children and Youth, at any time within two years of the return by the authorities of my criminal and child abuse background checks to The Presbyterian Church, Sewickley.

I, the undersigned, do hereby release and forever discharge The Presbyterian Church, Sewickley, and its agents; and agree to indemnify and hold harmless the Church and its agents, from and against any claims that may arise from my violation of the volunteer screening policy and/or the Statement of Purpose and Procedure Safeguarding The Well-Being of Children and Youth of The Presbyterian Church, Sewickley.

Signature: _____ Date: _____

If under age 18,
Parents or Guardian's Signature: _____ Date: _____

Witness Signature: _____ Date: _____

The information contained in this form is confidential. This form will be kept on file in the office at The Presbyterian Church, Sewickley, PA.

SP 4-164 (12-99) <p style="text-align: center;">PENNSYLVANIA STATE POLICE REQUEST FOR CRIMINAL RECORD CHECK</p>	FOR CENTRAL REPOSITORY USE ONLY (LEAVE BLANK)																
PART I: TO BE COMPLETED BY REQUESTER (INFORMATION WILL BE MAILED TO REQUESTER ONLY)	DATE OF REQUEST																
<p style="text-align: center;">*** TYPE OR PRINT LEGIBLY WITH INK ***</p> NOTE: IF THIS FORM IS NOT LEGIBLE OR NOT PROPERLY COMPLETED, IT WILL BE RETURNED UNPROCESSED TO THE REQUESTER. A RESPONSE MAY TAKE THREE WEEKS OR LONGER TO PROCESS. WARNING: A PERSON COMMITS A MISDEMEANOR OF THE THIRD DEGREE IF HE/SHE MAKES A WRITTEN FALSE STATEMENT, WHICH HE/SHE DOES NOT BELIEVE TO BE TRUE.																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 2px;">REQUESTER NAME</td> <td colspan="3" style="padding: 2px;">The Presbyterian Church, Sewickley</td> </tr> <tr> <td style="padding: 2px;">ADDRESS</td> <td colspan="3" style="padding: 2px;">414 Grant Street</td> </tr> <tr> <td style="padding: 2px;">CITY</td> <td style="padding: 2px;">STATE</td> <td colspan="2" style="padding: 2px;">ZIP</td> </tr> <tr> <td style="padding: 2px;">Sewickley</td> <td style="padding: 2px;">PA</td> <td colspan="2" style="padding: 2px;">15143</td> </tr> </table>		REQUESTER NAME	The Presbyterian Church, Sewickley			ADDRESS	414 Grant Street			CITY	STATE	ZIP		Sewickley	PA	15143	
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<p style="text-align: center;">CONTACT TELEPHONE NUMBER (INCLUDING AREA CODE)</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">4</td> <td style="width: 20px;">1</td> <td style="width: 20px;">2</td> <td style="width: 20px;">-</td> <td style="width: 20px;">7</td> <td style="width: 20px;">4</td> <td style="width: 20px;">1</td> <td style="width: 20px;">-</td> <td style="width: 20px;">4</td> <td style="width: 20px;">5</td> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> </tr> </table>		4	1	2	-	7	4	1	-	4	5	5	0				
4	1	2	-	7	4	1	-	4	5	5	0						

REQUESTER IDENTIFICATION (ONLY CHECK ONE BLOCK)				
<input checked="" type="checkbox"/> INDIVIDUAL/NONCRIMINAL JUSTICE AGENCY - ENCLOSE A CERTIFIED CHECK/MONEY ORDER IN THE AMOUNT OF \$10.00 PAYABLE TO: "COMMONWEALTH OF PENNSYLVANIA" THE FEE IS NONREFUNDABLE.				
<input type="checkbox"/> FEE EXEMPT NONCRIMINAL JUSTICE AGENCY				
*** DO NOT SEND CASH OR PERSONAL CHECK ***				
NAME/SUBJECT OF RECORD CHECK (LAST)		(FIRST)		(MIDDLE)
MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NUMBER (SOC)	DATE OF BIRTH (DOB)	SEX	RACE

REASON FOR REQUEST (CHECK ONE BLOCK)				
<input type="checkbox"/>	EMPLOYMENT (IF APPLICABLE, CHECK ONE OF THE FOLLOWING)	<input type="checkbox"/>	ELDER CARE	<input type="checkbox"/>
<input type="checkbox"/>	ADOPTION/FOSTER CARE	<input type="checkbox"/>	CHILD CARE	<input type="checkbox"/>
<input type="checkbox"/>	OTHER (SPECIFY)	<input type="checkbox"/>	SCHOOL DISTRICT	
ONLY CHECK THIS BLOCK IF YOU WANT TO REVIEW YOUR ENTIRE CRIMINAL HISTORY				
<input type="checkbox"/> INDIVIDUAL ACCESS AND REVIEW OR FIREARMS CHALLENGE-ENTIRE CRIMINAL HISTORY (AVAILABLE ONLY TO SUBJECT OF RECORD CHECK OR LEGAL REPRESENTATIVE WITH LEGAL AFFIDAVIT OF LEGAL REPRESENTATIVE ATTACHED)				

REQUESTER CHECKLIST DID YOU ENTER THE FULL NAME, DOB, AND SOC? DID YOU ENCLOSE THE \$10.00 FEE (CERTIFIED CHECK/MONEY ORDER)? <p style="text-align: center;">*** DO NOT SEND CASH OR PERSONAL CHECK ***</p> DID YOU ENTER YOUR COMPLETE ADDRESS INCLUDING ZIP CODE AND TELEPHONE NUMBER IN THE BLOCKS PROVIDED?	AFTER COMPLETION MAIL TO <p style="text-align: center;"> PENNSYLVANIA STATE POLICE CENTRAL REPOSITORY - 164 1800 ELMERTON AVENUE HARRISBURG, PA 17110-9758 717-783-9973 BUSINESS HOURS 8:15 am - 4:15 pm (Monday - Friday) </p>
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PART II: CENTRAL REPOSITORY RESPONSE ONLY			***DO NOT WRITE BELOW THIS LINE***		
INFORMATION DISSEMINATED <input type="checkbox"/> NO RECORD <input type="checkbox"/> CRIMINAL RECORD ATTACHED		INQUIRY DISSEMINATED BY		SID NUMBER	
THE INFORMATION DISSEMINATED BY THE CENTRAL REPOSITORY IS BASED ON THE FOLLOWING IDENTIFIERS THAT MATCH THOSE FURNISHED BY THE REQUESTER.			CERTIFIED BY		
<input type="checkbox"/> NAME	<input type="checkbox"/> SOCIAL SECURITY NUMBER	(DIRECTOR, CENTRAL REPOSITORY)			
<input type="checkbox"/> DATE OF BIRTH	<input type="checkbox"/> RACE				
<input type="checkbox"/> SEX	<input type="checkbox"/> MAIDEN/ALIAS NAME				

This response is based on a comparison of data provided by the requester in Part I against the information contained in the files of the Pennsylvania State Police Central Repository only, and does not preclude the existence of criminal records which might be contained in the repositories of other local, state, or federal criminal justice agencies.

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

COMPLETE SECTION I ONLY. PRINT CLEARLY IN INK. ENCLOSE \$10.00 MONEY ORDER ONLY. PAYABLE TO DEPARTMENT OF PUBLIC WELFARE. DO NOT SEND CASH OR PERSONAL CHECK.

SEND TO CHIDLINER AND ABUSE REGISTRY, DEPARTMENT OF PUBLIC WELFARE, P.O. BOX 8170 HARRISBURG, PA 17105-8170

APPLICATIONS THAT ARE INCOMPLETE ILLEGIBLE OR RECEIVED WITHOUT FEE WILL BE RETURNED UNPROCESSED. IF YOU HAVE QUESTIONS CALL 717-783-6211

CHIDLINER USE ONLY
DATE RECEIVED BY CHIDLINER

SECTION I APPLICANT IDENTIFICATION

IN THIS SPACE PRINT APPLICANTS FULL NAME AND ADDRESS (DO NOT USE INITIALS)

NAME

STREET

CITY, STATE
ZIP CODE

SOCIAL SECURITY NUMBER		
AGE	DATE OF BIRTH	DAYTIME PHONE NO.
SEX <input type="checkbox"/> M <input type="checkbox"/> F		COUNTY YOU LIVE IN

PREVIOUS NAMES USED SINCE 1975 (Include Maiden Name, Nicknames, Aliases)

(FIRST, MIDDLE, LAST)

(FIRST, MIDDLE, LAST)

PURPOSE OF CLEARANCE (Check ONE block ONLY)

<input type="checkbox"/> CHILD CARE	<input checked="" type="checkbox"/> VOLUNTEERS-A copy of your PROCESSED "Request for Criminal Record" (Form SP4-164) must be attached. Out-of-state residents must also attach a copy of their PROCESSED FBI clearance (Form FID-258).	<input type="checkbox"/> CWEP (Community Work Experience Program Participant)
<input type="checkbox"/> FOSTER CARE		
<input type="checkbox"/> ADOPTION		
<input type="checkbox"/> SCHOOL		

SIGNATURE OF CAO REP _____

CAO PHONE NO _____

PREVIOUS ADDRESSES SINCE 1975 (Attach additional pages if necessary)

1. _____
2. _____
3. _____
4. _____

HOUSEHOLD MEMBERS (List everyone who lived with you at anytime since 1975 to the present).

NAME (First, Middle, Last) Do not use initials.	RELATIONSHIP	PRESENT AGE	SEX
1.			
2.			
3.			
4.			
5.			
6.			

I certify that the above information is accurate and complete to the best of my knowledge and belief and submitted as true and correct under penalty of law (Section 4904 of the Pennsylvania Crimes Code).

Applicants are required to show the Administrator the original document. Administrators are required to keep a copy of this child abuse history record on file. Any person altering the contents of this document may be subject to civil, criminal or administrative action.

APPLICANT'S SIGNATURE _____

DATE _____

DO NOT WRITE IN THIS SECTION - CHIDLINER USE ONLY

SECTION II RESULTS OF HISTORY CHECK

APPLICANT IS NOT LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE. APPLICANT IS LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE (SEE BELOW).

STATUS OF REPORT	DATE OF INCIDENT	STATUS OF REPORT	DATE OF INCIDENT
1.		3.	
2.		4.	

VERIFIER _____

DATE _____

VERIFIER'S SUPERVISOR _____

DATE _____

SECTION III

VOLUNTARY CERTIFICATION FOR CHILD CARE SERVICES

_____ has requested a certification which includes a clearance of his/her name against the child abuse, school employee, and criminal history reports.

The results of the child abuse and school employee report clearances are listed in Section II on the reverse side. The results of the criminal history reports are listed below. Out-of-state residents must have criminal history clearance from both the Pennsylvania State Police and the FBI. The voluntary certification may be obtained every two years.

It is the responsibility of parents and guardians to review this information to determine the suitability of the applicant as a substitute caregiver.

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

- Applicant is named as the perpetrator of a "Founded" child abuse or school employee report which occurred in the last five years.
- Applicant is named as the perpetrator of a "Founded" child abuse or school employee report which occurred over five years ago.
- Applicant is named as the perpetrator of an "Indicated" child abuse or school employee report.
- Applicant is not named as the perpetrator of any child abuse or school employee report contained in the Statewide Central Register.

PENNSYLVANIA STATE POLICE CLEARANCE

- Record exists and contains convictions which prohibit hire in a child care position. Report attached.
- Record exists, but convictions do not prohibit hire in a child care position. Report attached.
- Record exists, but no convictions are shown. This does not prohibit hire in a child care position. Report attached.
- No record exists. Report attached.

FBI CLEARANCE

- Record exists and contains convictions which prohibit hire in a child care position. Report attached.
- Record exists, but convictions do not prohibit hire in a child care position. Report attached.
- Record exists, but no convictions are shown. This may not prohibit hire in a child care position. Report attached.
- No record exists. Report attached.
- No FBI clearance required.

VERIFIER_____
DATE_____
VERIFIER'S SUPERVISOR_____
DATE

***** Adopted by Session on 3/14/06 *****
***** Amended by the Christian Education Committee for the Session 5/20/08 *****

STATEMENT OF PURPOSE AND PROCEDURE
SAFEGUARDING THE WELL-BEING OF
CHILDREN AND YOUTH

The members of The Presbyterian Church, Sewickley (“TPCS”) are committed to the safety, welfare, and protection of all children and youth¹ participating in the activities and programs of TPCS. This commitment includes the protection of all children and youth from any form of abuse or harassment whether physical, mental or sexual. During each baptism of an infant, child, or adult into this covenant of faith, the members of this church pledge to uphold that person in the spirit of Christ and to teach, strengthen and support the individual’s relationship with the household of God.

In our pledge to sustain one another in the Gospel of Christ, we also undertake the responsibility to preserve the integrity of each person within our house of faith.

It is the policy of The Presbyterian Church, Sewickley, that no child or youth shall be subjected to the preventable risk of any form of abuse or harassment by TPCS employees, teachers or volunteers while on TPCS property or while engaged in TPCS activities or programs at any location. The standards implemented in this Statement of Purpose and Procedure seek to uphold the commitment to the safety of the children and youth of TPCS, whether members or guests. Therefore, all TPCS activities and programs, regardless of location, involving children or youth, will be subject to the following policy:

- As often as practicable, at least two adults who have received their clearances will be assigned to supervise or lead all activities involving children and youth.
- No person will be approved as a teacher or volunteer leader of children or youth activities until a Volunteer Information Form and criminal and child abuse checks have been completed² and the person has been a member of TPCS for a minimum of six (6) months or the Senior Pastor³ has recommended waiver of the membership requirement.

Screening Process

Employees, teachers of children and youth, and volunteers for children and youth activities or programs of TPCS will be required to complete a Volunteer Information Form in the form set forth in Exhibit “A” attached hereto, providing personal and confidential information necessary to perform criminal and child abuse background checks on each individual. While this process understandably

¹ As used herein, the terms “child”, “children”, and “youth” refer to all persons under 18 years of age.

² Security background checks will only be conducted on persons 18 years of age and older

³ As used herein, the term “Senior Pastor” may also refer to the acting Head of Staff, as designated by the Senior Pastor, Session, or Presbytery

trespasses into the privacy of our lives, the security of our children and youth outweighs the personal invasion inherent with such investigation and disclosures. All personal information voluntarily disclosed, the results of all security background or the refusal of any person to participate in a program or activity in lieu of such disclosure requirements would be maintained in the strictest of confidence.

A staff person designated by the Session as the “Administrator” and his or her staff will conduct criminal and child abuse background checks for persons 18 and older, including a search for potential criminal child abuse and other misconduct history. The Administrator will initially review the results of the security background checks. After this initial review, if the Administrator determines that further review should be made, the Volunteer Information Form and the results of the criminal and child abuse background check will be forwarded to the Senior Pastor.

The Administrator will maintain a secured storage cabinet in the Church’s Business Office for all Volunteer Information Forms. The results of the security background checks will be destroyed periodically as required by the guidelines mandated by the Commonwealth of Pennsylvania. Volunteer Information Forms and security background checks will be updated every two (2) years. Whether disclosed voluntarily or as a result of the security background check, the following items will automatically disqualify a volunteer from participating in the leadership or sponsorship of any children or youth activity or program.

If an applicant disputes information that appears in his or her criminal history record, he or she must follow the procedure to review personal criminal history record, which includes forwarding fingerprints and the applicable fees. If it is determined that the record is indeed the applicant’s own criminal record, a new Request for Criminal Record Check should be filled out and the box entitled “Individual Access and Review by Subject of Record Check or Legal Representation Representative” should be checked and sent to the PA State Police (for the PA State Police Criminal Record Check). The PA State Police will then send the results along with a form for challenging the results. If there is a discrepancy with the PA Child Abuse History Clearance, the applicant would have to contact the county in which the incident occurred, ask for the report to be sent to him/her, and then call Childline at 717-783-1964 to appeal.

Violations

Any indictment alleging the offenses of, or any conviction for: (i) murder; (ii) rape; (iii) aggravated assault; (iv) crimes related to the possession, use, or sale of drugs or controlled substances; (v) sexual abuse; (vi) sexual assault; (vii) aggravated sexual assault; (viii) injury to child; (ix) incest; (x) indecency with a child; (xi) inducing sexual conduct or sexual performance of a child; (xii) possession or promotion of child pornography; (xiii) the sale, distribution, or display of harmful or illegal material to a minor; (xiv) employment harmful to children; or (xv) abandonment or endangerment of a child. Any indictment

alleging the offense of any of the items listed will result automatically in the suspension of the volunteer in activities with children until the matter is resolved.

All applicants must sign and acknowledge that they have an affirmative obligation to notify the Senior Pastor of any arrest, charge, indictment and / or allegation levied against them at any time after their criminal and child abuse background checks have been returned to the Administrator. Applicants also agree and acknowledge that they will voluntarily cease any and all activities with children or youth pending a resolution of the arrest, charge, indictment and / or allegation.

All other convictions or charges for any other crimes not listed above will be reviewed by the Senior Pastor, the Administrator, and at the Senior Pastor's discretion, the staff persons responsible for children's and youth activities. These persons will be responsible for determining whether such conviction or charges will disqualify a volunteer from participation in any child or youth activity.

The following acts or omissions are violations of the Policy and will not be tolerated or accepted during any TPCS activity or program. Such acts or omissions should be immediately reported:

- Any direct observations or evidence of sexual activity in the presence of or in association with a child or youth.
- Any display or demonstration of sexual activity, abuse, insinuation of abuse, or evidence of abusive conduct towards a child or youth.
- Sexual advances or sexual activity of any kind between a youth and a child.
- Infliction of physically abusive behavior or bodily injury to a child or youth.
- Physical neglect of a child, children or youth, including failure to provide adequate supervision in relation to the activities of TPCS.
- Emotional or psychological mistreatment of a child, children or youth, including verbal abuse.
- The presence or possession, or being under the influence of any illegal drugs.
- The consumption of or being under the influence of alcohol while leading or participating in children's or youth functions of TPCS.

Any violation of this Policy on the part of any member of the staff, employee, member or volunteer will result in immediate dismissal from participation in all children and youth activities and programs of TPCS. In the case of staff members or employees, any violation of this Policy may result in termination. In accordance with the laws of the Commonwealth of Pennsylvania, any and all reports of abuse will immediately be forwarded to the appropriate authorities. Compliance with the reporting aspects of this Policy does not complete the obligation you may have to report the incident to the Sewickley Police Department or Child Protective Services.

Reporting Violation of Policy

In order to maintain an environment free of destructive acts toward all children and youth, the staff, employees, teachers, parents and volunteers of TPCS must be aware of their individual responsibility to report any questionable circumstance, observation, act, omission, or situation thought to be in violation of the Policy. All questions or concerns of any suspected activity of abuse or harassment shall be directed to the Senior Pastor. If the Senior Pastor is not readily available, then the matter should be reported to the designated Head of Staff or the Administrator. Should the activity of concern involve the Senior Pastor, the matter should be reported to the Committee on Ministry of Pittsburgh Presbytery.

Responsibilities of a Witness to a Policy Violation

In the event anyone personally witnesses an occurrence in violation of the Policy, that person will be asked to complete an Incident Report. Anyone who witnesses such an occurrence should adhere to the following guidelines as to how such a situation should be handled to insure the security of the child or youth involved and to protect against physical, emotional, or psychological injury to all people involved.

Guidelines

- REPORT THE INCIDENT IMMEDIATELY
- DO NOT LEAVE CHILD, CHILDREN, OR YOUTH ALONE TO REPORT THE INCIDENT.
- DO NOT PERSONALLY CONFRONT THE ALLEGED OR ACCUSED VIOLATOR OF THE POLICY.
- ALLOW THE DESIGNATED ADMINISTRATOR, DIRECTOR OF CHILDREN'S MINISTRY, DIRECTOR OF YOUTH MINISTRY, ASSOCIATE PASTOR, OR SENIOR PASTOR TO PROVIDE YOU WITH INSTRUCTIONS FOR REPORTING OF THE INCIDENT TO THE PARENTS OR GUARDIAN.
- THE SENIOR PASTOR WILL BE SOLELY RESPONSIBLE FOR ALL COMMUNICATIONS ON BEHALF OF THE CHURCH.

Responsibilities of Individuals Who Receive Report of a Policy Violation from a Child

In the event a child or youth reports abusive conduct, regardless of where the conduct occurred, the person initially contacted by the child should complete an Incident Report. Anyone who receives such a report should adhere to the guidelines outlined above as to how such a situation should be handled to insure the security of the child or youth involved and to protect against physical, emotional, or psychological injury to all people involved. Under this circumstance, the Incident Report should include the specific words first spoken by the child or youth concerning the incident. All reported details of the child's or youth's first conversation with an adult should be recorded verbatim in the Incident Report.