



Our Lady of Victory School

4755 Whitehaven Parkway, NW, Washington, DC 20007
202-337-1421 or 202-337-4167 Fax 202-337-2068

August 31, 2007

Re: Archdiocese of Washington Child Protection Policy

All parents who intend to have “substantial contact” with OLV students need to be in full compliance with the ADW child protection policy. Examples of substantial contact include: judging science fair, chaperoning a field trip, or helping at the book fair.

As the mandatory process needs to be completed BEFORE you will be able to work with children, we encourage you to begin the steps outlined below as soon as possible.

1. Log onto www.virtus.org and create an account. Click on word **Registration** in the yellow on left hand side of Virtus Online page.
2. Complete the enclosed Application Form (make a copy) and send the original to the school office. Wait for verification from the school that your application has been entered into the database. Then complete steps 3 and 4 and 8 simultaneously.
3. Log onto www.adw.org. Click on **Youth** then **Child Protection Training** to register for a training class. (Option: can follow link from this page to the Virtus page to register.) Please make sure that you attend the training class and sign in, or you will not receive credit. Afterwards, please log on to your virtus account to print off a proof of attendance and submit it to the school office.
4. Call (301) 853-5363 to make an appointment for the FBI/State Criminal Background Investigation. Take a Criminal Background Investigation Authorization form (provided by OLV) and a photo I.D. There is a charge, if you need the school to cover the cost, please contact Mrs. Martinez on (202) 337-1421.
5. Send the receipt provided by the technician to the school. Keep a copy.
6. Follow up with the Diocese if you do not receive the results from CJIS. If your prints fail and you are not re-printed within three months, you will have to begin the process again.
7. Make copies of both of the letters you receive from CJIS (4-6 weeks after printing) and send the originals to the school.
8. Read the ADW policy available at www.adw.org in the **Child Protection** section. Sign the last page which states that you have read and will abide by the policy. Send the signed page to the school. Keep a copy.

For more information and additional forms, log onto www.adw.org and click on **Youth**, then on the yellow tab on the left hand side **Child Protection**.

If you are transferring from another Archdiocesan school and know that you are in compliance with the policy, please contact the diocesan (301) 853-5363 and ask for your records to be transferred to Our Lady of Victory School, location 128. Please submit the application, receipt from fingerprinting, proof of virtus training, policy signature and letters from CJIS to the school as soon as possible.

We apologize for the inconvenience of being asked to complete the above steps. Working with the Archdiocese in their efforts to provide a safe environment for our children does require a commitment from each of us.

Refer questions to Karenna Armington, OLV Counselor at Counselor@OLVschooldc.org.

With regards,

Sheila Martinez
Principal



ARCHDIOCESE OF WASHINGTON

Volunteer Application Form

This form is to be completed, signed and returned to the Child Protection Compliance Coordinator at the parish, school or agency at which you are to provide volunteer services. A copy of this completed form will be retained in a file on site. The original will be sent to the Archdiocesan Office of Human Resources.

Last Name	First	Middle	Last 4 Digits of SSN	Date
Present Street Address	City	State	Zip	Daytime Phone
				Evening Phone
Permanent Address (If different from present address)				Cell Phone No.
				E-mail Address
Have you ever volunteered for an Archdiocesan location? <input type="checkbox"/> Yes <input type="checkbox"/> No				Are you 18 years of age or older?
If yes, give details: _____				<input type="checkbox"/> Yes <input type="checkbox"/> No

I am interested in VOLUNTEERING at school: _____; parish: _____; agency: _____

Interested in volunteering for school activities religious education youth ministry coaching other _____

I am available mornings afternoons evenings weekdays weekends Date available: _____

VOLUNTEER ACTIVITIES

Please list all present and former volunteer activities beginning with your present or most recent position first. Use additional pages if needed. Include all other names worked under if different than the name you used on this form.

Parish/Company/Organization Name	Phone	From	To
Address		City, State Zip	
Duties/Responsibilities			
Parish/Company/Organization Name	Phone	From	To
Address		City, State Zip	
Duties/Responsibilities			
Parish/Company/Organization Name	Phone	From	To
Address		City, State Zip	
Duties/Responsibilities			

REFERENCES

Please provide 2 personal/professional references. If you have resided in this area for less than 2 years please provide at least one reference from your previous area of residence.

Name	City, State		
Phone	Relationship	Years Known	
Name	City, State		
Phone	Relationship	Years Known	

IMPORTANT – PLEASE READ THIS

You must complete questions I, II, III & IV *only if* the volunteer position(s) for which you are applying for will involve significant contact with children or other vulnerable individuals, i.e. elderly, mentally or emotionally handicapped, etc. Such positions include but are not limited to catechist, coaching, school volunteer, scout leader, youth minister, counseling, and maintenance.

I. Has a civil or a criminal complaint ever been filed against you that alleged *sexual misconduct or child abuse* by you or your participation in or facilitation of such activities (including internal complaints given to management or supervisors at places of employment)? Yes No *If yes, please explain below and attach a separate sheet if additional space is necessary. Please provide the date, nature, and place of the incident leading to the complaint; where the complaint was filed; disposition of the complaint; and identify by name and title the person(s) who investigated the complaint.*

II. Do you presently serve, or have you ever served, as a volunteer for any organization, entity or group in which you had significant contact with children or other vulnerable populations (e.g. elderly, mentally or emotionally handicapped, etc.)? Yes No *If yes, please provide the name, address, and phone number of the organization, period of volunteer service, supervisor's name; and briefly describe your activities and/or duties. Attach a separate sheet if additional space is necessary.*

III. Have you ever chosen not to renew or continue any employment or volunteer service, had your employment or volunteer service terminated, or been subject to any disciplinary action, for reasons relating to allegations of sexual misconduct or child abuse by you? Yes No *If yes, please explain below and attach a separate sheet if additional space is necessary. Please include in your explanation the date, nature, and place of the occurrence(s) or allegations(s) and the disposition of the matter(s). Also, identify your employer and supervisor at the time by name, address and telephone number.*

IV. Have you ever been convicted of a crime (felony or misdemeanor) other than a minor traffic violation? Yes No *If yes, please explain below and attach a separate sheet if additional space is necessary. Please include in your explanation the date and place of any conviction, and the crime for which you were convicted.*

IMPORTANT --- Please read and sign below

The information provided on this form is true, correct and complete. If accepted as a volunteer, any misstatement or omission of fact on this form may result in termination of my services. I grant permission to check my background and references and release the *Archdiocese of Washington* and Archdiocesan locations from any and all resultant liability.

I further understand that all persons who will have significant contact with children are required to undergo a state and federal criminal background check before working with children. Other volunteer positions that may require undergoing this clearance process may include, but are not limited to, payroll, bookkeeping, accounting, and maintenance.

Print Name: _____ Signature: _____ Date: _____

This section is to be completed by Pastor, Principal or Agency Director only.

The necessity of passing a state and federal criminal background check for positions involving significant contact with children or other vulnerable persons while providing volunteer services has been explained to this applicant. Acceptance of volunteer services is contingent upon the applicant successfully completing the state & federal criminal background check. References will be checked before accepting an applicant's volunteer services. Signed applications are to be returned to the Child Protection Compliance Coordinator at your parish, school or agency for forwarding to the Archdiocesan Director of Human Resources.

Authorized Signature _____ Date _____ Name of Parish, School, Agency _____ Location Number _____ Telephone number _____