

Appendix X

Safe Environment Outside Organization Compliance Form

Catholic Diocese of Gallup

As part of our mission to provide a safe and secure environment for our parishioners, employees, students, teachers, and any others who may be on our premises or property, we require that all outside organizations who come into contact or interact in any way with minors or who host events weekly or at least 5 times per month at a Diocesan place of business meet Diocesan Safe Environment guidelines and provide certain information regarding their organization and the local leader(s), and that they certify that such information is correct.

ORGANIZATION'S INFORMATION				
Name of Organization				
Type of Organization and Place of Domicile				
Type of Service provided by Organization				
LEADERSHIP INFORMATION				
Last Name	First Name	Middle Initial	Date of Birth	Social Security #
Mailing Address & Physical Address	City	State	Zip	Gender: __ Male __ Female
Length at above address ____ Years ____ Months If you have resided at the above location less than 5 years, list previous addresses below. If additional space is needed please attach an additional sheet.				
Mailing Address & Physical Address	City	State	Zip	____ Years ____ Months
Mailing Address & Physical Address	City	State	Zip	____ Years ____ Months
Home Telephone #	Cell Phone #	Organization Position/Title		
Email Address				
DIOCESE OF GALLUP QUESTIONNAIRE				
1. Reason organization is meeting on Diocesan premise(s)?				
2. Name(s) and address(s) of parish(s), school(s) or Diocesan Institution(s) hosting your organization.				
3. Who is your (parish/school/diocesan institution) contact (provide Name, Phone & Email)?				
4. What activities will your organization be engaged in at said parish(s), school(s) or Diocesan Institution(s)?				
5. How often will your organization use the parish(s), school(s) or Diocesan Institution(s) facility (i.e. 1hour/week; 2 hours/6times per month)?				
REFERENCES (Minimum of 3 required. If residing in Diocese of Gallup less than 3 years, 2 references				

must be from previous location.)				
Reference Name:	Mailing Address, City, State, Zip	Daytime Phone number	How long have you known this person?	Has this person agreed to be a reference?
Professional/Civic				
Personal				
Personal				
Family Member				
Family Member				

BACKGROUND CHECK INFORMATION
Have you changed your last name in the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No Was name change due to marriage/divorce? <input type="checkbox"/> Yes <input type="checkbox"/> No What was your previous last name? _____
Have you, or to your knowledge, has any member of your organization, ever been accused of or arrested for physically, sexually, or emotionally abusing a child or an adult? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain
Indicate if you or any member of your organization have ever been arrested, indicted, awaiting trial or have ever admitted to committing a misdemeanor or felony. If yes please list offense, date, jurisdiction and outcome. <input type="checkbox"/> Yes <input type="checkbox"/> No Do you, or to your knowledge, any member of your organization have any outstanding warrants? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there anyone living in your home or any member of your organization that is a registered sex offender, been accused of or is awaiting trial for a criminal offense against a child? <input type="checkbox"/> Yes <input type="checkbox"/> No What state do you currently live in? _____ At any time in the past 5 years have you lived in a different state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what state did you live in? _____
Driver's License: State _____ Number _____ Expiration date _____
SAFE ENVIRONMENT TRAINING CLASS, LOCATION and DATE
Date: _____ Location: _____ Trainer: _____

DECLARATION/CERTIFICATION- Leadership Person
Please read each statement and **initial** on the lines below.

<p>_____ I certify that I will update this form annually. I further certify that all statements and (initials only) information contained in this Compliance Form are true and that any misrepresentation or omission is cause for rejection of the organization to be on the property of a Diocese of Gallup place of business, and further, that any misrepresentation or omission is cause for the termination and/or cancellation of any contract with said organization.</p>
<p>_____ I understand that a background check may be conducted prior to and during my (initials only) service. I authorize investigations of all statements contained in the application.</p>
<p>_____ I certify that all members of our organization will observe the Catholic Diocese of (initials only) Gallup rules and regulation while on the property of any Diocese of Gallup place of business, and that all members of our organization will conduct themselves in a professional manner and will exhibit the respect and good behavior that is required in the presence of children and in sacred places.</p>
<p>_____ By signing this Compliance Form, I hereby represent and agree that I am duly (initials only) authorized to act for and on behalf of the said organization, and that this Compliance Form is and shall be binding upon the Organization.</p>

***** DO NOT SIGN UNTIL YOU HAVE READ AND INITIALED THE ABOVE STATEMENTS.**

Applicant Signature: _____ **Date:** _____

Trainer Review

I have reviewed the applicant document and verify applicant completed training and initialed the declaration statements. Trainer Signature: _____ Date: _____

Screening Committee

I have reviewed the applicant document and have highlighted missing or incomplete information. Screening Committee Signature: _____ Date: _____

Diocesan Safe Environment Requirements for Outside Organizations

All outside organizations who come into contact or interact in any way with minors or who host events weekly or at least 5 times per month at a Diocesan place of business must meet the following guidelines:

1. Leader(s) of hosted events/meetings must be in compliance with volunteer safe environment training requirements. This includes completing the following:
 - a. Annual safe environment training
 - b. Annual update of the Outside Organization Compliance Form
 - c. Face-to-face interview conducted by Diocesan contact
 - d. Reference check conducted by Diocesan contact
 - e. Current background check (within 5 years)
2. Organization must annually submit leadership name(s) and contact information to Diocesan location office.
3. Organization leader(s) must agree to comply with the *Diocese of Gallup Policy and Procedures for the Protection of Minors*.