

PROTECTING OUR CHILDREN

In June 2012, the Archdiocese of Cincinnati changed its program concerning the *Decree on Child Protection*. Personnel who participate in child-centered activities for at least three hours per month on a recurring basis (e.g., scout leaders, CYO coaches, PREP teachers, and clinic volunteers) must now complete the NCS/VIRTUS course. This course is offered at several locations throughout the Archdiocese but you must pre-register on-line by going to <http://www.virtusonline.org> and selecting the course you would like to attend. On-line instructions will lead you through the registration process. If you have already completed the old Decree on Child Protection class, it is **VALID** through December 2014. However, if you plan to continue your involvement with child-centered activities beyond 2014, you must complete the VIRTUS program by December 2014. **You do not need to get re-fingerprinted.** If you are a **NEW VOLUNTEER**, you must also be fingerprinted at an Archdiocesan fixed facility. The two fixed facilities' locations in the Dayton area are St. Peter's in Huber Heights and St. Albert's in Kettering. You can go to the Archdiocese of Cincinnati website and locate the times for fingerprinting; **HOWEVER** you must complete FP-1, Background Check Release Form (copy attached) before you go to the fingerprinting site. This form requires you to secure the signature of Incarnation's Designated Representative for the VIRTUS program prior to getting fingerprinted. Joe Brittelli is our representative and you will find his office in the Pastoral Center. You can contact Joe at joseph.brittelli@incarnation.catholic.org or on his parish cell, 937-604-4298 for additional guidance, questions or concerns.

ARCHDIOCESE OF CINCINNATI

Background Check Release Form

As the designated representative at _____, I acknowledge that the person listed below is or will be working /
(Parish / School / Institution)
 volunteering at our location, and we will be responsible for payment. _____
Signature, Printed Name, and Phone Number

PLEASE **PRINT** THE FOLLOWING INFORMATION **LEGIBLY**:

LEGAL NAME: _____
(First) (Middle) (Last)

ADDRESS: _____

CITY, STATE, ZIP: _____

DAYTIME PHONE () _____ SSN: _____ / _____ / _____

DATE OF BIRTH: _____ / _____ / _____ PLACE OF BIRTH: _____

List up to three **Archdiocese of Cincinnati** parishes / schools / institutions where you will work or volunteer, the **city**, your **category**: **EDucator, EMPLOYEE, VolunTEER, PArent, Deacon, Priest**; and your **position** (coach, CCD teacher, scout leader, music director, etc.):

Parish/School/ Institution	City	Category	Position

Are you currently or will you become:

- Paid school bus or van driver
- Day Care Center (Child Daycare Center Owner, Licenses, or Administrator Type A Daycare Home owner)

Are you currently or will you become an Archdiocese of Cincinnati school employee?

- Yes – complete the information below
- No – skip the next section

If required, your fingerprint results will then go to the Ohio Department of Education, Teacher Certification, as part of the application process.

- Paid teacher, including non-tax supported school teacher
- Paid substitute teacher (substitutes are cleared for all schools and do not need to list school(s) individually below)
- Paid teacher aide or paid classroom aide
- Paid lunchroom monitor or paid playground monitor
- Pupil Activity Supervisor permit or coach – ***THIS APPLIES TO ALL PAID / VOLUNTEER HIGH SCHOOL COACHES***
- Non-paid student teacher or non-paid teacher doing pre-service field experience
- Other _____

RELEASE OF BACKGROUND CHECK RESULTS

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize this WebCheck agency (Archdiocese of Cincinnati) to submit information to the Ohio Bureau of Criminal Identification and Investigation (BCI&I) and the Federal Bureau of Investigation (FBI) (if requested) to conduct a criminal records check for information relating to me.

I voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction and juvenile delinquency adjudication records to the WebCheck provider or agency I have designated to receive this information.

I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees, the Archdiocese of Cincinnati, its parishes, schools, agencies, institutions, employees and volunteers, and any and all individuals connected therewith from all claims and liability related to this authorized criminal record review and dissemination.

This authorization and waiver is valid for one year from the date this background check was conducted.

SIGNATURE: _____ **DATE:** _____ / _____ / _____

By initialing, you are stating that all information on the computer Webcheck screen, including your Social Security Number, is correct. **We cannot make any changes once the Webcheck is submitted.**

For Site Office Use Only

TYPE OF PRINTS (check one): BCI&I only BCI&I and FBI FBI only
Results sent to Ohio Department of Education / Teacher Certification: Yes N/A

LOCATION CODES _____

BCI&I PAID \$ _____

SIGNATURE OF FINGERPRINTER _____

FBI PAID \$ _____

SITE LOCATION _____