Name						
------	--	--	--	--	--	--



Scout Troop 360 New Adult Registration Checklist

This packet provides the paperwork necessary to register as a Leader with Troop 360. Any adult volunteering with Troop 360, wishing to attend, summer camp or participate in any other Troop 360 activities (excluding Troop meetings) must be registered with Troop 360 and have completed Youth Protection Training.

- ☐ Troop 360 "NEW ADULT CHECKLIST" (this form)
- ☐ Boy Scouts of America Adult Application
- ☐ Annual BSA Health and Medical Record (Part A & B)
 - Part C will be required for participation in High Adventure or summer camps
- ☐ BSA Additional Disclosures & Background Check Authorization Form
- ☐ Archdiocese of San Antonio Forms
 - o Permission, Release & Liability Waiver Forms
 - o Criminal Background Search Authorization & Release Form
 - Code of Conduct Signature page only
 For those who might drive scouts to an activity;
 - o Motor Vehicle Record Request Form
 - Copy of valid Drivers License
 - Copy of Auto Insurance
- ☐ Copy of Current Health Insurance Coverage or Military ID for TriCare
- ☐ Youth Protection Training Certificate (less than 2 years old) in hardcopy
- ☐ Certificate of completed training for "Troop Committee"
- ☐ National Registration Fee (if not already registered with BSA in any unit)

National Registration Fee Worksheet

Troop360satx.square.site

Date of Signup	National Dues
Full Year (Jan-Dec)	66.00
February	60.50
March	55.00
April	49.50
Мау	44.00
June	38.50

Date of Signup	National Dues
July	33.00
August	27.50
Sept	22.00
Oct	16.50
Nov	11.00
December	5.50

Note: <u>Currently registered</u> scouters (in any unit) have already paid for national dues until Dec recharter.

IMPORTANT DISCLOSURE: In order to ensure the SAFETY of all participants, Scouts and Leaders may not be able to participate in activities until COMPLETE paperwork and training records are submitted.

\wedge	Name	
	Scout Troop 360 New Adult Registration Checklist	
	Scout Troop 360 New Adult Registration Checklist	



ADULT PARTICIPATION OPPORTUNITIES

TROOP COMMITTEE MEMBER:

The Troop Committee functions as an administration and support organization for the Troop. The Committee ensures that the program is conducted in accordance with the principles and methods of Scouting, and that they are conducted safely. The Committee handles Troop funds, fund-raising activities, membership drives, activity permits and coordination, and advancement records.

**BSA requires that all Committee Members complete three (3) short ONLINE trainings.

- Troop Committee Before the First Meeting
- Troop Committee First 30 Days
- Troop Committee Position Trained

Website for Training – "my.scouting.org" to get started

T360 Sv	wag										
•	T-Shirts - \$10 ea	nch - Sizes : Adult		S/	M/	L/	XL/	XXL			
•	Water Bottles -	\$10 each : Wi	de-M	outh	Narrow	-Mouth					
Registra	Card Fee: ation Sub Total:	3% if paid by card	_								
Total Pa	ıb Total: nid:		_								
•	nave any registra n@gmail.com	tion questions, plea	se se	e the m	nembers	hip chair	Chris K	wan @ 210	0-382-317	0 or	
+++++	++++++	-+++++++++++++ Tr	oop U	lse Only	++++++	++++++	+++++	+++++++	+++++++	+++++++	+++++
	360 Patch			Mail B	ох				Add Med	forms to Re	d Book
	T-Shirt			Binder	-				Notify Lea	dership	
	Water Bottle			Drop A	App @ Co	uncil					

ADULT APPLICATION

This application is also available in Spanish. Esta solicitud también está disponible en español.

Your participation in the BSA can help youth become better citizens.

Adult leaders serve as important role models for youth in the BSA and this application aids the chartered organization in selecting qualified adult volunteer leaders.

Youth Protection Training

All adult applicants are required to take this training in order to complete the adult application process. Go to my. Scouting.org to create an account and take the training online or contact your local council for classroom training. Include a copy of your completion certificate with this application.

Mission

The mission of the BSA is to prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the Scout Oath and Scout Law.

Criminal Background Check*

In order to complete the adult application process, you will need to review the different disclosures that have been separately provided to you. The separate authorization form must be signed and returned when you submit your application.

Excerpt From the Declaration of Religious Principle

The BSA maintains that no member can grow into the best kind of citizen without recognizing an obligation to God and, therefore, recognizes is that the home and organization or group with which the member is connected shall give definite attention to religious life. Only persons the religious element in the training of the member, but it is absolutely nonsectarian in its attitude toward that religious training. Its policy willing to subscribe to these precepts from the Declaration of Religious Principle and the Bylaws of the BSA shall be entitled to register.

*The three different background check forms must be torn off and each separately given to the applicant.





Leader Requirements

The BSA is open to all who meet the requirements, and leaders are selected based on individual merit. Adult leaders must possess the moral, educational, and emotional qualities that the BSA deems necessary for positive leadership to youth. They must also:

- Abide by the Scout Oath, Scout Law, and Scouter Code of Conduct. The Scouter Code of Conduct can be found at www.scouting.org/health-and-safety/gss/bsa-scouter-code-of-conduct/ Subscribe to the precepts of the Declaration of Religious Principle.
- Reside within the USA or a U.S. territory, or be a U.S. citizen residing outside the USA
 - Be 21 years of age or older for primary leadership positions. Be 18 years of age or older for assistant leadership positions.
- Complete Youth Protection training (YPT) before application is processed and renew training as required by going to my. Scouting org and creating an account.
- Review the disclosure information related to the BSA's background check process and complete and sign a Background Check Authorization form.
 - Take leader position-specific training at my. Scouting.org. Classroom training may also be available through your local council.

APPROVAL REQUIRED—UNIT ADULTS

Chartered organization head or chartered organization representative. The chartered organization representative is approved by the head of the chartered organization. All other adult leader applications must be accepted and approved by the head of the chartered organization or the chartered organization representative.

APPROVAL REQUIRED—COUNCIL and DISTRICT ADULTS

Scout executive or designee must accept and approve all council and district adults.

Scout executive or designee must approve any adults who answer "yes" to any Additional nformation question. The adult leader application process will not be complete until Youth Protection training has been completed and a criminal background check has been obtained.

Medical Record, No. 680-001, found on www.scouting.org/forms and provide it to your unit leadership. **Health information.** You should inform your unit leadership of any condition that might limit your participation. Before participating in activities with your unit, please fill out the Annual Health and

Scouting magazine. All registered, paid adult leaders receive Scouting magazine; \$2 of the registration ee is for the subscription.

Boys' Life. Registered adults get a special rate. For a subscription to a magazine that helps children grow in the Scouting program, just fill in the *Boys' Life* circle on the application and pay the subscription price.

The annual national registration fee is nonrefundable.

BSA Privacy Policy

with the organization. No commercial or unauthorized use is made of the names, addresses, and other BSA protects the confidentiality of the names and personal information of those who are affiliated confidential information. The BSA and its affinity groups may use registration information to notify registrants of benefit opportunities. The

For general questions, contact your local BSA council.

What Is the BSA Program?

publications are not a part of the Scouting program. Leaders must not allow youth members or program The BSA program is outlined in the official publications of the BSA. Activities that are not in these BSA participants to engage in any unauthorized or prohibited activities.

Training for New Leaders

The BSA is committed to your success as a volunteer while serving young people. To help you be successful there are training materials designed for you. Training resources are available through your local council and at my.Scouting.org.

What Makes a Trained Leader?

You are considered a trained leader when you have completed leader position-specific training for your position and have current Youth Protection training.

Youth Protection Begins With YouTM

Scouting. For that reason, the BSA continues to create barriers to abuse beyond what have previously Child abuse is a serious problem in our society, and unfortunately, it can occur anywhere, even in existed in Scouting. The BSA is committed to providing a safe environment for young people. All adult leaders must complete Youth Protection training as part of the registration process and renew their training as required. It is highly recommended that parents who participate in Scouting activities complete YPT. To learn more about the BSA's Youth Protection resources, go to www.scouting.org/training/youth-protection/

possession, manufacture, or distribution of child pornography, online solicitation, enticement, or showing of obscene material. No person may abdicate this reporting responsibility to any other person. or belief that any child is or has been physically or sexually abused; physically or emotionally neglected; Mandatory Reporting

All persons involved in Scouting must immediately report to local authorities any good-faith suspicion exposed to any form of violence or threat; or exposed to any form of sexual exploitation including the

Additionally, any **known or suspected abuse or behavior that might put a youth at risk** must also be reported to the local Scout executive or the Scouts First Helpline (1-844-SCOUTS1 or 1-844-726-8871) if your Scout executive or local council cannot be reached.

Youth Protection Policies

- Two registered adult leaders 21 years of age or over are required at all Scouting activities, including meetings. There must be a registered female adult leader over 21 in every unit serving females.
 - A registered female adult leader over 21 must be present for any activity involving female youth. One-on-one contact between adult leaders and youth members is prohibited both inside and outside of Scouting.

These and other key Youth Protection policies are addressed in the training and at www.scouting.org/ training/youth-protection/ To learn about the BSA's other health and safety policies, please review the online version of the Guide to Safe Scouting, the Scouter Code of Conduct, and the Sweet Sixteen of BSA Safety, which are available at www.scouting.org/health-and-safety.

Scout Oath

On my honor I will do my best to do my duty to God and my country and to obey the Scout Law; to help other people at all times; to keep myself physically strong, mentally awake, and morally straight.

A Scout is trustworthy, loyal, helpful, friendly, courteous, kind, obedient, cheerful, thrifty, brave, clean, and reverent.

Please print one letter in each space. BSA ADULT APPLICATION Middle name List name (First name)	Suffix I All nuestions MIST be ans	All nuestions MIST be answered. Write WINE if annicable.
		Council Year
Preferred nickname:	2. Experience working w	Experience working with youth in other
Country Home address City State	Zip code organizations. Please	provide contact information.
Primary phone Ext. Date of birth (mm/dd/yyyy)	3. Previous residences (for last 10 years). City	ior last 10 years). State
Ethnic background: O Black/African American O Rative American O Rative American O Rative American O Pacific Islander O Caucasian/White	4.	Current memberships (religious, community, business, labor, or professional organizations).
Social Security No. (required) Occupation Employer	5. References. Please lis your character. References. Please list your character. References. Please list your character. References. Please list your character. Please list your character. Please list your character.	References. Please list those who are familiar with your character. References may be checked.
Country Business address City State	Zip code Name Name Name Takenson Name Name Name Name Name Name Name Name	
Position code Scouting position title Are you an Eagle Scout? Date earned (mm/dd/yyyy)	() (Additional information. (Mark each answer.) a. Have you ever been removed from consideration and a leadership.	Yes No nr removed from O O
Email address O Work (Select one) O Home	Boys' Life position in an organization due to allegations regarding your personal conduct or behavior? Explain:	inzation due to mization due to mg your personal or? Explain:
The BSA and fifting that:	b. Do you use illegal drugs or abuse alcohol? Explain:	drugs or abuse
To be completed by unit	c. Have you ever been arrested for a criminal offense (other than minor	n arrested for a OO
Careful review of the information provided on this application is a significant step in Scouting's efforts to protect its youth members and deliver a quality program. APPROVALS FOR UNIT ADLITS: I have reviewed this application and the responses to any questions answered "Yes," and have made any follow-up inquiries necessary to be satisfied that the applicant possesses the moral, educational, and emotional qualities to be an adult leader in the BSA.	й	Explain: cense ever been O Cense ever been C
Signature of chartered organization head or representative Date Signature of Scout executive or designee	Date	
Unit O Pack O Troop O New leader O Position change or multiple registering. ype: O Crew O Ship O Former leader O Participant O Transfer application from unexpired certificate: Town Community or multiple application from unexpired certificate:	e. Have you ever been investigated for, accused of, or charged with abuse or neglect of a minor child? Explain:	n investigated for, Oged with abuse or child? Explain:
Unit OR Council No: Council No	f. Are you aware of any reason not listed above that may call into question your suitability to	any reason O Surability to
Registration \$ Boys' Life \$ PAID: O Cash O Check No. O Check No.	supervise, guide,	rare rof, and lead

Tear off the following pages and provide to applicant separately.

BACKGROUND CHECK DISCLOSURE

A consumer report is a background check in which information (which may include, but is not limited to, criminal background, driving background, character, general reputation, personal characteristics, and mode of living) about you is gathered and communicated by a consumer reporting agency ("CRA") to Boy Scouts of America and/or its subsidiaries, affiliates, other related entities, and/or successors (the "Company").

Company may obtain a consumer report on you to be used for employment purposes (in your case, this means for the purpose of evaluating you as a new or existing volunteer).

CALIFORNIA <u>STATE LAW DISCLOSURES</u> (Non-Credit)

Under California law, an "investigative consumer report" is a consumer report in which information on a consumer's character, general reputation, personal characteristics, or mode of living is obtained through any means. Boy Scouts of America and/or its subsidiaries, affiliates, other related entities, and/or successors (the "Company") may obtain an investigative consumer report (which may include information described above) from an investigative consumer reporting agency ("ICRA") on you in connection with your status as a volunteer (i.e., for employment purposes under California law). The nature and scope of this investigation includes your character, general reputation, personal characteristics, or mode of living information, including criminal history and driving record.

The ICRA preparing the investigative consumer report and conducting the investigation will be First Advantage, P.O. Box 105292, Atlanta, GA 30348, 800-845-6004. Information regarding First Advantage's privacy practices can be found at https://fadv.com/privacy-policy/.

Under California Civil Code section 1786.22, you are entitled to a visual inspection of files maintained on you by an ICRA, as follows:

- (1) In person, if you appear in person and furnish proper identification, during normal business hours and on reasonable notice. A copy of your file shall also be available to you for a fee not to exceed the actual costs of duplication services provided;
- (2) By certified mail, if you make a written request, with proper identification, for copies to be sent to a specified addressee. An ICRA complying with requests for certified mailings under California Civil Code section 1786.22 shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA;
- (3) A summary of all information contained in your files and required to be provided by California Civil Code section 1786.10 shall be provided to you by telephone, if you have made a written request, with proper identification for telephone disclosure, and the toll charges, if any, for the telephone call are prepaid by you or charged directly to you.

"Proper Identification," as used above, means information generally deemed sufficient to identify you, which includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you pursuant to California Civil Code section 1786.10 and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection under California Civil Code section 1786.22.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

ADDITIONAL DISCLOSURES & BACKGROUND CHECK AUTHORIZATION

Additional Disclosures

The state disclosures below are included because state law requires them to be provided in writing. Some of the below rights, notices, or information also may apply to individuals from, applying to, or volunteering in states not listed below. There may be additional requirements, options, or provisions applicable to you and you may have additional rights under applicable law that are not required to be disclosed to you in writing.

<u>Minnesota:</u> You have the right to request a complete and accurate disclosure of the nature and scope of any consumer report from First Advantage, P.O. Box 105292, Atlanta, GA 30348, 800-845-6004.

New York: Boy Scouts of America and/or its subsidiaries, affiliates, other related entities, and/or successors (the "Company") may request or utilize subsequent consumer reports (other than investigative consumer reports) on you throughout your volunteer relationship with Company. Upon request, you will be informed whether or not a consumer report was requested, and if such report was requested, informed of the name and address of the CRA that furnished the report. Your written request should be made to Company at Boy Scouts of America, Membership Standards Team S201, 1325 West Walnut Hill Lane, P.O. Box 152079, Irving Texas 75015-2079. You may also contact the Company by email at MembershipStandards@scouting.org.

	AUT	HORIZATION	
(Please print)			
Name: First	Middle	Last	Suffix
List any other names used (nicknames)	me, maiden/married l	ast names):	
Date of Birth:	U	nit Type and Number:	
America and/or its subsidiarito procure consumer report(s) defined by applicable Calificheck(s)/driving record(s), on investigative consumer reportion of the Califor received separately from the Check Authorization. This not allow the Company to obstatements, and notices in the Disclosures (Non-Credit), Authorization. My authorization. My authorizational consumer report(record(s), during my volunte additional authorizations. Eauthorize the Company to short organizations for business authorize the Company to short organization for business authorized on me. □ For California, Minneson	ies, affiliates, other (as defined by ferfornia state law) my background forting agency ("Irnia State Law Company), as we sauthorization application credit check the Background as well as these zation remains very extent permittee (s), which in my er relationship we have this information for a collected for a volume to the collected f	hereby consent to and authorized related entities, and/or successed deral law) and/or investigative consequences, which in my case means crown a consumer reporting agency (CRA"), as described in the Bar Disclosures (Non-Credit) (each last these Additional Disclosure plies only to criminal checks/drivities. I have reviewed and understant the Additional Disclosures & Baralid throughout my volunteer read by applicable law, I agree Consequence means criminal background thout providing additional disclosure prohibited by applicable law, tion with Company's local council place me in certain positions, unteer position, a consumer report that Company of the report that Company accepted to the report that Company of the report that Company of the report that Company	ors (the "Company") asumer report(s) (as iminal background ("CRA") or from an ackground Check the of which I have the Background and records and does not the information, fornia State Law ackground Check lationship with the mpany can procure and check(s)/driving osures or obtaining I consent to and ls and/or chartered work sites, etc.). I ort will have been receive from the

Date

Part A: Informed Consent, Release Agreement, and Authorization



Full name:		High-adventure base participants:			
Date of birth:		Expedition/crew No.:	_		
	or staff position:	_			
Informed Consent, Release Agreement, and Authorization I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or your local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.	I also hereby assign and grant to the local council and the Boy Scouts of America, as well as the authorized representatives, the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of me or my child at all Scouting activities, and I hereby release the Boy Scouts of America, the local council, the activit coordinators, and all employees, volunteers, related parties, or other organizations associated				
In case of an emergency involving me or my child, I understand that efforts will be made to contact the individual listed as the emergency contact person by the medical provider and/or adult leader. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for me or my child. Medical providers are authorized to disclose protected health information to the adult in charge, camp	reproduce photogra at the dis any of th	the activity from any and all liability from such use and publication. I further authorize the duction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said graphs/film/videotapes/electronic representations and/or sound recordings without limits e discretion of the BSA, and I specifically waive any right to any compensation I may have if the foregoing. If the foregoing.	atior for		
medical staff, camp management, and/or any physician or health-care provider involved in providing medical care to the participant. Protected Health Information/Confidential Health Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information,	of the pa	e parent or legal guardian of the minor, is guilty of a misdemeanor. (California Penal Code on 19915[a]) My signature below on this form indicates my permission.	13101		
45 C.F.R. §§160.103, 164.501, etc. seq., as amended from time to time, includes examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of	_	permission for my child to use a BB device. (Note: Not all events will include BB devices.)		
the participant's ability to continue in the program activities.	□ Che	hecking this box indicates you DO NOT want your child to use a BB device.	_		
(If applicable) I have carefully considered the risk involved and hereby give my informed consent for my child to participate in all activities offered in the program. I further authorize the sharing of the information on this form with any BSA volunteers or professionals who need to know of medical conditions that may require special consideration in conducting Scouting activities. With appreciation of the dangers and risks associated with programs and activities, on my	•	NOTE: Due to the nature of programs and activities, the Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. However, so that leaders can be as familiar as possible with an limitations, list any restrictions imposed on a child participant in connection with programs or activities below.	n al y		
own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.	List par	participant restrictions, if any:	_		
I understand that, if any information I/we have provided is found to be inaccurate, it may limit and/Philmont Scout Ranch, Philmont Training Center, Northern Tier, Sea Base, or the Summit Bechtel Re and weight requirements and restrictions, and understand that the participant will not be al met. The participant has permission to engage in all high-adventure activities described, except as parent or guardian's signature is required.	eserve, I ha I lowed to p s specifical	have also read and understand the supplemental risk advisories, including height to participate in applicable high-adventure programs if those requirements are not cally noted by me or the health-care provider. If the participant is under the age of 18, a			
Participant's signature:		Date:			
Parent/guardian signature for youth:((if participant is und	lor the age of	Date:			
(if participant is und	ici ilie age 01	в UI 1UJ	_		
Complete this section for youth participants only:					
Adults Authorized to Take Youth to and From Events:					
You must designate at least one adult. Please include a phone number.					
Name:	Name:	e:	_		
Phone:	Phone:	9:	_		
Adults NOT Authorized to Take Youth to and From Events:					
Name:	Name:	2:	_		



Full name	:		High-adventu	re base participants:	
	rth:		1	Vo.:	
Date of bi	i ui		or staff position:_		
Age:	Gender:	Height (inches):		Weight (lbs.):	
Address:					
Citv·	State:	;	7IP code·	Phone:	
Unit leader:					
	No.:			Unit No.:	
	t Insurance Company:				
Tieaitii/Accideii	t insurance company.		Folicy No		
Please	e attach a photocopy of both sides of the insurance card. If you	do not have medical in	surance, enter "none	e" above.	
In case of en	nergency, notify the person below:				
Name:			Relationship:		
Address:		Home phon	e:	Other phone:	
Alternate conta	ct name:		Alternate's phone	:	
Ugalth U	iotory				
Health H	y have or have you ever been treated for any of the following?				
Yes No	Condition			Explain	
	Diabetes	Last HbA1c percentag	e and date:	Insulin pump: Yes 🗆	No □
	Hypertension (high blood pressure)				
	Adult or congenital heart disease/heart attack/chest pain (angina)/ heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.				
	Family history of heart disease or any sudden heart-related death of a family member before age 50.				
	Stroke/TIA				
	Asthma/reactive airway disease	Last attack date:			
	Lung/respiratory disease				
	COPD				
	Ear/eyes/nose/sinus problems				
	Muscular/skeletal condition/muscle or bone issues				
	Head injury/concussion/TBI				
	Altitude sickness				
	Psychiatric/psychological or emotional difficulties				
	Neurological/behavioral disorders				
	Blood disorders/sickle cell disease				
	Fainting spells and dizziness				
	Kidney disease				
	Seizures or epilepsy	Last seizure date:			
	Abdominal/stomach/digestive problems				
	Thyroid disease				
	Skin issues				
	Obstructive sleep apnea/sleep disorders	CPAP: Yes □ No □			
	List all surgeries and hospitalizations	Last surgery date:			



List any other medical conditions not covered above

Date	of birth:			, , , , , ,	or staff position:			
DO YOU	gies/Medicati Juse an Epinephri NJECTOR? Exp. date	_		DO YOU USE AN INHALER? Exp.	ASTHMA RESCUE date (if yes)	□ YES □	l NO	
Are you	allergic to or do you have	any adverse reaction to any of the fo	ollowing?					
Yes	No Allergies o	r Reactions	Explain	Yes No Alle	ergies or Reactions	Explain		
	Medication			Plants				
	Food			Insect	bites/stings			
List all	medications curren	tly used, including any over-	the-counter medication	ns.				
☐ Che	eck here if no medio	ations are routinely taken.	\square If additional s	space is needed, pleas	e list on a separate sheet	and attach.		
	Medication	Dose	Frequency		Reason			
☐ YES	S □ NO Non-p	prescription medication administration	on is authorized with these ex	ceptions:			_	
Administ	tration of the above medic	cations is approved for youth by:						
		Parent/guardian signature	/	MD/DO, NP,	or PA signature (if your state requires s	gnature)	_	
4		tions in sufficient quantities and in		e sure that they are NOT ex	pired, including inhalers and Epi	Pens. You SHOULD NOT STOP ta	aking	
4	any maintenance med	dication unless instructed to do so	by your doctor.					
lmm	unization							
The follo	wing immunizations are i	recommended. Tetanus immunizatio						
,		ck the disease column and list the d		, ,	Please list any addit medical history:	ional information about yo	ur	
Yes	No Had Disease	Immunizatio	on	Date(s)				
		Tetanus			_			
		Pertussis						
		Diphtheria			_			
		Measles/mumps/rubella						
		Polio			DO NOT WRITE IN THE Review for camp or special a			
		Chicken Pox			Reviewed by:			
		Hepatitis A			Date:			
		Hepatitis B			Further approval required:			
		Meningitis			Reason:			
		Influenza						
		Other (i.e., HIB)			Approved by:			
	<u> </u>				Date:			

High-adventure base participants:

Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, D0), nurse practitioners, or physician assistants.

Full name:	High-adventure base participants:
Date of birth:	Expedition/crew No.: or staff position:



You are being asked to certify that this individual has no contraindication for participation in a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. You can also visit www.scouting.org/health-and-safety/ahmr to view this information online.

Please fill in the following information:

	Yes	No	Explain
Medical restrictions to participate			

Yes	No	Allergies or Reactions	Explain	Yes	No	Allergies or Reactions	Explain
		Medication				Plants	
		Food				Insect bites/stings	

Height (inches)	Weight (lbs.)	ВМІ	Blood Pressure	Pulse
			/	

Examiner's Certification Normal **Abnormal Explain Abnormalities** I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions): Eyes True False **Explain** Fars/nose/throat Meets height/weight requirements. Has no uncontrolled heart disease, lung disease, or hypertension. Lungs Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her Heart orthopedic surgeon or treating physician. Has no uncontrolled psychiatric disorders. Abdomen Has had no seizures in the last year. Does not have poorly controlled diabetes. Genitalia/hernia If planning to scuba dive, does not have diabetes, asthma, or seizures. Musculoskeletal Examiner's signature: Date: Neurological Examiner's printed name: Skin issues _State: ____ City: _ Other Office phone:

Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
60	166	65	195	70	226	75	260
61	172	66	201	71	233	76	267
62	178	67	207	72	239	77	274
63	183	68	214	73	246	78	281
64	189	69	220	74	252	79 and over	295



ARCHDIOCESE OF SAN ANTONIO

PARENTAL/GUARDIAN PERMISSION, RELEASE, AND LIABILITY WAIVER

PLEASE CAREFULLY READ ALL TERMS BELOW BEFORE SIGNING. THIS DOCUMENT AFFECTS YOUR AND YOUR CHILD'S LEGAL RIGHTS:

Participant's Name:		Date of Birth:				
Parent/Guardian's Name(s):						
Address:	City:	State:Zip:				
Home Phone: ()	_ Business Phone: ()	Cell Phone: ()				
To Be Completed By Sponsor:						
Activity (please insert description of the activity/event):						
Parish/School/Organization ("Sponsor"):						
Destination:	Date(s) of Activity:	_			
Designated Supervisor of Activity:						
Method of Transportation:						
Date and Time of Departure:	Date and T	ime of Return:				

In consideration for Participant, a minor child, being permitted by Sponsor to participate in the Activity, which includes transportation to, from, and during the Activity (the "Transportation"), I, being the undersigned and the parent/legal guardian of Participant, hereby acknowledge, consent, and agree as follows:

- 1. <u>Consent to Participate and to Transportation</u>. I hereby consent to Participant's participation in the Activity. I further consent to the Transportation of Participant by means of the method of transportation designated above.
- 2. Knowledge of Risks. I acknowledge and agree that I have been advised by Sponsor and that I understand that participation by Participant in the Activity and the Transportation of Participant may involve serious risks, including, without limitation, death, bodily injury, damage to personal property, and dangers resulting from injury or accident. Knowing the risks, dangers, and hazards involved in Participant's participation in the Activity and Transportation, I nevertheless voluntarily consent and agree to Participant's participation in the Activity and Transportation. I, INDIVIDUALLY AND IN MY CAPACITY AS THE PARENT/LEGAL GUARDIAN OF PARTICIPANT, HEREBY EXPRESSLY AND SPECIFICALLY ASSUME FULL RESPONSIBILITY FOR ANY AND ALL RISKS OF DEATH OR BODILY INJURY TO PARTICIPANT OR DAMAGE TO PARTICIPANT'S PERSONAL PROPERTY RESULTING FROM OR ARISING OUT OF (I) PARTICIPANT'S PARTICIPATION IN THE ACTIVITY, OR (II) SPONSOR'S TRANSPORTATION OF PARTICIPANT, WHETHER CAUSED BY OR CONTRIBUTED BY THE NEGLIGENCE OF THE SPONSOR, THE ARCHDIOCESE OF SAN ANTONIO (THE "ARCHDIOCESE"), OR ANY OF THEIR RESPECTIVE AFFILIATES, DIRECTORS, OFFICERS, AGENTS, EMPLOYEES, VOLUNTEERS, SUCCESSORS AND ASSIGNS (COLLECTIVELY, THE "CHURCH PARTIES") OR OTHERWISE. (Initials)
- 3. RELEASE AND WAIVER. I, INDIVIDUALLY AND IN MY CAPACITY AS THE PARENT/LEGAL GUARDIAN OF PARTICIPANT, HEREBY, RELEASE, WAIVE, AND FOREVER DISCHARGE THE CHURCH PARTIES FROM ANY AND ALL LIABILITY, CLAIMS, LOSSES, JUDGMENTS, DAMAGES, COSTS, EXPENSES, AND DEMANDS OF ANY KIND OR NATURE WHATSOEVER, EITHER IN LAW OR IN EQUITY, RESULTING OR ARISING FROM PARTICIPANT'S PARTICIPATION IN THE ACTIVITY OR SPONSOR'S TRANSPORTATION OF PARTICIPANT. I, INDIVIDUALLY AND IN MY CAPACITY AS THE PARENT/LEGAL GUARDIAN OF PARTICIPANT, HEREBY

EXPRESSLY ACKNOWLEDGE AND AGREE THAT (I) THIS RELEASE DISCHARGES ALL OF THE CHURCH PARTIES FROM ANY AND ALL LIABILITY THAT PARTICIPANT AND I, INDIVIDUALLY AND IN MY CAPACITY AS THE PARENT/LEGAL GUARDIAN OF PARTICIPANT, MAY HAVE AGAINST THE CHURCH PARTIES WITH RESPECT TO THE DEATH OR BODILY INJURY TO PARTICIPANT OR DAMAGE TO PARTICIPANT'S PERSONAL PROPERTY THAT MAY RESULT FROM (I) PARTICIPANT'S PARTICIPATION IN THE ACTIVITY, OR (II) SPONSOR'S TRANSPORTATION OF PARTICIPANT; AND (III) THIS RELEASE EXTENDS TO ALL ACTS OF NEGLIGENCE, WHETHER CAUSED BY OR CONTRIBUTED BY ANY OF THE CHURCH PARTIES OR OTHERWISE. (Initials)

- 4. INDEMNITY. I, INDIVIDUALLY AND IN MY CAPACITY AS PARENT/LEGAL GUARDIAN OF PARTICIPANT, UNCONDITIONALLY AGREE TO INDEMNIFY, DEFEND, AND HOLD HARMLESS THE CHURCH PARTIES FROM ANY AND ALL LIABILITY, CLAIMS, LOSSES, JUDGMENTS, DAMAGES, DEMANDS, COSTS AND EXPENSES OF ANY KIND OR NATURE WHATSOEVER, EITHER IN LAW OR IN EQUITY, (INCLUDING, WITHOUT LMITATION, COURT COSTS AND ATTORNEY'S FEES) INCURRED BY ANY OF THE CHURCH PARTIES RESULTING OR ARISING FROM (I) PARTICIPANT'S PARTICIPATION IN THE ACTIVITY, OR (II) SPONSOR'S TRANSPORTATION OF PARTICIPANT, INCLUDING, WITHOUT LIMITATION, THE DEATH OR BODILY INJURY TO PARTICIPANT OR DAMAGE TO PARTICIPANT'S PERSONAL PROPERTY THAT MAY RESULT FROM (I) PARTICIPANT'S PARTICIPATION IN THE ACTIVITY, OR (II) SPONSOR'S TRANSPORTATION OF PARTICIPANT, WHETHER CAUSED BY OR CONTRIBUTED BY THE NEGLIGENCE OF ANY OF THE CHURCH PARTIES OR OTHERWISE. (Initials)
- 5. Medical Authorization. In the event of any injury or illness of Participant during the Activity, I hereby authorize and consent to the transportation of Participant to the nearest medical or dental facility, and, should the need arise, I hereby further authorize and consent to any x-ray, examination, anesthetic, medical or surgical diagnosis and treatment in the discretion of the attending physician or dentist. I understand that I am giving this authorization in advance of any specific diagnosis, treatment or hospital care being required and I am providing this authorization to give authority and power to render any care which the medical provider and/or dental provider deems advisable. None of the foregoing medical or dental treatments shall be withheld if I cannot be reached prior to the administration of such medical and/or dental treatments. I hereby agree that I shall be solely responsible for the payment of any and all costs for such medical and/or dental treatment of Participant, and in no event shall any of the Church Parties be required to pay for any such costs or expenses. I, INDIVIDUALLY AND IN MY CAPACITY AS THE PARENT/LEGAL GUARDIAN OF PARTICIPANT, HEREBY, RELEASE, WAIVE, AND FOREVER DISCHARGE THE CHURCH PARTIES FROM ANY AND ALL LIABILITY, CLAIMS, LOSSES, JUDGMENTS, DAMAGES, COSTS, EXPENSES, AND DEMANDS OF ANY KIND OR NATURE WHATSOEVER, EITHER IN LAW OR IN EQUITY, RESULTING OR ARISING FROM ANY SUCH MEDICAL OR DENTAL TREATMENT RENDERED TO PARTICIPANT. (Initials)
- 6. Photo/Video Consent and Release. I hereby authorize Sponsor and the Archdiocese to take photographs, recordings, and/or videos (whether electronic, digital, or otherwise) of Participant in connection with the Activity, and I hereby consent to the use, reproduction, and publication of such images by Sponsor and the Archdiocese in connection with the promotion and publicity of the activities of Sponsor and the Archdiocese, including, without limitation, publication of such images on Sponsor's website. I, individually and in my capacity as parent/legal guardian of Participant, hereby waive any right to inspect or approve the actual use by Sponsor or the Archdiocese of any such image of Participant. Such images of Participant shall be the sole property of Sponsor, and I, individually and in my capacity as parent/legal guardian of Participant, acknowledge and agree that neither I nor Participant shall be entitled to any compensation whatsoever should any such images of Participant be used by Sponsor or the Archdiocese. (Initials)_______
- 7. COVENANT NOT TO SUE. I HEREBY ACKNOWLEDGE AND AGREE THAT I, INDIVIDUALLY OR IN MY CAPACITY AS PARENT/LEGAL GUARDIAN OF PARTICIPANT, WILL NOT INSTITUTE ANY SUIT OR ACTION AT LAW, OR OTHERWISE, AGAINST ANY OF THE CHURCH PARTIES OR INITIATE OR ASSIST IN THE PROSECUTION OF ANY CLAIM FOR DAMAGES, OR CAUSES OF ACTION, WHICH I, INDIVIDUALLY AND/OR IN MY CAPACITY AS PARENT/LEGAL GUARDIAN OF PARTICIPANT, MAY HAVE BY REASON OF INJURY OR DEATH TO PARTICIPANT OR DAMAGE TO PARTICIPANT'S PERSONAL PROPERTY RESULTING OR ARISING FROM PARTICIPANT'S PARTICIPATION IN THE ACTIVITY OR SPONSOR'S TRANSPORTATION OF PARTCIPANT. (Initials)______
- 8. <u>Severability</u>. If any term, covenant, or condition of this Parental/Guardian Permission, Release, and Waiver of Liability (the "**Agreement**") is, to any extent, invalid, illegal, or unenforceable, I hereby agree that the remainder of this Agreement shall not be affected thereby, and shall, notwithstanding, remain binding, valid and enforceable to the fullest extent permitted by law.

I COVENANT, CERTIFY AND REPRESENT TO SPONSOR THAT I AM THE PARENT/LEGAL GUARDIAN OF PARTICIPANT AND THAT I HAVE FULL LEGAL AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF PARTICIPANT. I HAVE (I) FULLY READ THIS AGREEMENT, (II) FULLY UNDERSTAND ITS TERMS, AND (III) AGREE TO BE BOUND BY ALL OF THE TERMS AND CONDITIONS CONTAINED HEREIN. I UNDERSTAND THAT I, ON MY OWN BEHALF AND ON BEHALF OF PARTICIPANT, HAVE GIVEN UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING THIS AGREEMENT. I, INDIVIDUALLY AND IN MY CAPACITY AS PARENT/LEGAL GUARDIAN OF PARTICIPANT, SIGNED THIS AGREEMENT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME BY ANY OF THE CHURCH PARTIES. I INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE BY ME AND PARTICIPANT OF ALL LIABILITY AGAINST THE CHURCH PARTIES TO THE FULLEST EXTENT PERMITTED BY APPLICABLE LAW.

	Date:	
Signature of Participant's Parent/Legal Guardian		
Printed Name of Participant's Parent/Legal Guardian		



City/State/Zip Code

Position:

Archdiocese of San Antonio

Office of Risk Management

2718 W. Woodlawn Ave. San Antonio, Texas 78228 Email: risk@archsa.org (210) 431-3465 Fax: (210) 431-7742

EMPLOYEE & VOLUNTEER

Motor Vehicle Record Request Form

This form is intended for anyone operating a motor vehicle on behalf of the Archdiocese of San Antonio, whether using a privately owned vehicle or a vehicle owned by the Archdiocese of San Antonio or one of its affiliates. The parish, school or agency shall submit this request document, along with a copy of the driver's license, and if applicable, a copy of the privately owned vehicle's auto liability ID card to the Office of Risk Management. The parish, school or agency shall maintain a copy of this submission, along with a copy of the driver permission/denial, issued by the Office of Risk Management and the motor vehicle record provided with the permission or denial. The parish, school or agency shall re-submit this request every 3 years. Drivers must be at least 21 years of age. ______ THIS SECTION TO BE FILLED OUT BY THE PARISH, SCHOOL OR AGENCY Name of Parish, School or Agency Contact Name Contact Phone Number Contact Email Address THIS SECTION TO BE FILLED OUT BY THE DRIVER Full Name (As it appears on DL) Driver's License Number and State Street Address (current)

ACKNOWLEDGEMENT AND CONSENT

Have you been charged with a moving violation within the last three years? () Y () N
If yes, please list date, location, and type of violation. Attach a separate sheet if necessary.
Have you been involved in a motor vehicle accident within the last three years? () Y () N If yes, please give the dates, locations, facts of loss and opinion as to fault for each accident. Attach a separate sheet if necessary.
Have you been arrested or charged with driving under the influence of alcohol or drugs within the last ten years? () Y () N If yes, please list the charge, jurisdiction (county and court) and disposition. Attach a separate sheet if necessary.
I,, understand that ARCHSA will run a motor vehicle record search to verify the statements I have made above. I do hereby release and authorize ARCHSA to perform a <i>motor vehicle</i> record search. Initials
I,, understand that as an employee or volunteer of ARCHSA, I am subject to the terms and conditions of the Archdiocese of San Antonio's Driver Policy. I have read and understand said policy. I understand that I am also expected to obey all of the rules of the road set forth by the appropriate jurisdictions in which I am driving. Initials
I,, understand that, if I use my personal vehicle, ARCHSA is not responsible for the damage, vandalism or theft of said vehicle, including any indirect financial damages that may accrue. I also acknowledge that said vehicle is not covered through the Archdiocesan insurance policy for first party damage. Initials
I,, understand that, if I use my personal vehicle, it is my responsibility to maintain an auto liability policy, with at least the minimum limits allowed by law, and that ARCHSA's policy is secondary (Texas Law); and, it is only applicable while I am actively engaged in the duties of my employment or volunteer position at ARCHSA. Initials
I,, understand that, if I use my personal vehicle, I am responsible for the safe
operation and proper maintenance of my vehicle. Initials
Printed Name: Date
Signature:Date

Archdiocese of San Antonio Norms Governing Criminal Background Checks

As part of the Archdiocese of San Antonio's pledge to protect children and create a safe environment, a program of **Criminal Background Checks ("CBC"**) began in September 2003. All parishes and agencies are subject to these Norms as stated below.

Screening Eligibility

- **1.1** All clergy, religious, seminarians, and employees must be screened regardless of the type of work they perform. Volunteers of the Archdiocese of San Antonio who directly minister, work or volunteer with minors and/or vulnerable persons ("Designated Volunteers") must also be screened.
- **1.2** Any person who does not submit to a required CBC will not be permitted to minister, work, or volunteer.
- **1.3** Employees of contracted/non-archdiocesan entities who have regular, direct contact with minors and/or vulnerable persons in the course of rendering services to the Archdiocese must be screened by their respective employer.
- **1.4** Contracted/non-archdiocesan entities must provide verification of CBCs prior to the time a contract is initiated or renewed.

Screening Timeframe

- **2.1** All clergy, religious, seminarians, employees, and Designated Volunteers must be screened when they present themselves to minister, work, or volunteer.
- **2.2** All existing clergy, religious, seminarians, employees, and Designated Volunteers will be screened every three years based on the date of their first screening.

Process for Criminal Background Checks

3.1 An outside CBC screening service will be used to process checks through databases and/or documents from law enforcement, criminal or civil justice, or public service agencies. Coordinators for each location will receive clearance information for each person through a web-based system and results from records will be sent to the Human Resources Office for further review and determination. In some cases, the Criminal Background Review Committee will decide if a person is allowed to be employed and/or volunteer.

- **3.2** Dishonest answers and/or failure to disclose information by an applicant will result in automatic denial of employee or volunteer status.
- **3.3** Any information gained through the CBC process can be used to determine if the individual is eligible for the position for which he/she applied or for service as a volunteer in a particular ministry including without limitation, reports of conviction, arrest, indictment, charge, probation, deferred adjudication, and pre-trial diversion. Results will be kept confidential to the extent required by law.

Timeframe for employment and volunteer services.

4.1 Parishes and Agencies must receive clearance before an employee or Designated Volunteer may begin employment or volunteer services.

Actions taken as a result of criminal background records.

- **5.1** Any person who has been involved in a sexual misconduct crime will be immediately notified by the Human Resources Office that he/she shall not minister, work or volunteer within the Archdiocese of San Antonio. An employee will be terminated, a volunteer will be dismissed, or an applicant will not be hired.
- **5.2** The criminal record of an individual involved in any other type of crime will be evaluated by the Committee.
- **5.3** The Committee shall make a determination on each individual case based on the results of the CBCs.
- **5.4** In certain circumstances, an individual may be given the opportunity to appear before a panel of Committee members for an Informational Hearing in order to provide additional information.
- **5.5** Limitations (i.e., no driving or transporting, no handling of money, etc.) may be placed on ministry, employment or volunteerism.
- **5.6** Any person dissatisfied with the decision of the Informational Hearing Panel may file a written request for an Administrative Review. The Committee reserves the right to determine whether an Administrative Review Hearing will be held.

Role of Criminal Background Review Committee

- **6.1** The Committee shall be appointed by the Archbishop.
- **6.2** The Committee will serve for the purpose of reviewing CBCs
 - * to decide clearance status, limitations and/or make individual recommendations;
 - * to conduct Informational Hearings; and/or

* to conduct Administrative Review Hearings.

6.3 The Committee shall maintain updated policies and procedures appropriate to the Archdiocese of San Antonio and in conjunction with revisions of the U.S.C.C.B. policies and procedures.

File Maintenance

7.1 Criminal Background Search Authorization forms will be maintained by the respective location and all data will be entered and maintained on a web-based system. Records of all CBCs will be maintained on a web-based system and by the Human Resources Office. Outcomes of all CBCs may be provided to the individual, supervisor, pastor, agency director, or those on a need-to-know basis.

THE ARCHDIOCESE OF SAN ANTONIO



CRIMINAL BACKGROUND SEARCH AUTHORIZATION & RELEASE FORM

**Please print as neatly as possible and fill out both sides. Illegible forms will be returned.

Name: First	N/C 1 11 -			4
First	Middle		L	ast
Other last names used in the past	five years:			
Current address:				
Str	reet	City	State	Zip
Work phone #:	Home phone	#:		
E-Mail Address:				
Date of birth:	G	ender: Male_	Female	
Oriver's license #:	State_			
Name of Parish, School, or Agenc	y:			
Name of Volunteer Position or Jo	b Title with Parish, Schoo	ol or Agency: _		
Will this position require you to v	vork or volunteer consiste	ently (more than	n one time) w	ith
FOR OFFICE USE ONLY:		ently (more than	n one time) w	rith
minors? Yes No		ently (more than	n one time) w	ith

Have you <u>ever</u> been convicted of, arrested for, charged with, placed on probation for, granted deferred adjudication for and/or given any pretrial diversion for <u>any</u> violation of the law? (You do not need to disclose minor traffic violations.)YESNO
If you answered "YES", please attach a separate piece of paper giving full details of the event. Please read the following paragraph carefully and sign below to indicate that you understand this document:
I hereby authorize the Archdiocese of San Antonio, and its agent(s), to request and receive any and all background information about me, including without limitation, my criminal history, information from Texas Department of Family and Protective Service and my driving record.
I understand that background information received from reporting agencies, may include arrests, convictions, plea bargains, deferred adjudications, delinquent conduct committed while a juvenile, expungement, and investigations.
I understand that a criminal background check will be conducted every three years, or as needed, per Archdiocesan policies, and I hereby give permission to the Archdiocese to conduct future criminal background checks without further written authorization.
I further release the Archdiocese of San Antonio and its agents, employees, personnel or representatives from any and all claims and liability arising out of the request for this information.
I certify that I can be trusted with the supervision, guidance, education and/or care of minors and/or vulnerable adults and that I will abide by the policies and procedures of the Archdiocese of San Antonio, of which I have been fully informed.
The statements made by me on this form are true, correct, accurate and complete and are made in good faith.
I understand that any false statements made on this form may result in the denial of the application, termination of employment, suspension of volunteer service, and/or other disciplinary action.
Signature: Date:

You must answer the following:



CODE OF CONDUCT

For Church Personnel within the Archdiocese of San Antonio

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For Church Personnel

I. Preamble

Church Personnel in our parishes, religious communities/institutes, schools, agencies, and youth serving agencies must exemplify Christian values and appropriate conduct. The *Code of Conduct* provides a set of standards for conduct in certain situations. Within the pretense or context of a ministry relationship, certain behaviors and situations are unacceptable. To ensure the proper monitoring of activities, especially those pertaining to youth and vulnerable adults, this *Code of Conduct* intends to establish a balance between encouraging positive and appropriate interactions and hindering inappropriate and/or potentially harmful or unsafe interactions. Establishing standards of conduct with this balance in mind assists in creating and maintaining environments where there is no opportunity for sexual misconduct or other harmful acts.

II. Responsibility

Adherence to the *Code of Conduct* is mandatory. Responsibility for knowledge of the policies contained in the *Code of Conduct* and adherence to the *Code of Conduct* rests with the individual. All persons performing work, ministry, or volunteer service within this organization are expected to follow these guidelines. Clergy, staff, and volunteers who disregard this *Code of Conduct* or fail to act consistently with the *Code of Conduct* will be subject to remedial action by the Archdiocese of San Antonio. Violations of these guidelines are a serious matter and will be investigated and resolved in accordance with the organization's policy. Corrective action may take various forms—from a verbal reproach to removal from the ministry based on the specific nature and circumstances of the offense and the extent of the harm or potential harm.

III. Definitions

1. Church Personnel

The following are included in the definition of "Church Personnel"

1.1 Clergy

- 1.1.1 Bishops, priests and deacons incardinated in the Archdiocese of San Antonio.
- 1.1.2 Priests and deacons who are members of religious institutes or in other forms of consecrated life, and who are assigned to pastoral work in the Archdiocese or who are otherwise engaged, with the Archbishop's consent, in the care of souls, the public exercise of divine worship, or other works of the apostolate in the Archdiocese.
- 1.1.3 Priests and deacons of other dioceses who the Archbishop assigns to pastoral work in this Archdiocese.
- 1.1.4 Priests and deacons residing within the boundaries of the Archdiocese, with the consent of the Archbishop, including retired clerics and those engaged in part-time or supply ministry.

1.2 Candidates for Ordination

- 1.2.1 All men enrolled in the seminary program at Assumption Seminary.
- 1.2.2 All men enrolled in seminary programs of religious orders and who are temporarily serving in ministry in the Archdiocese.





For Church Personnel

1.2.3 All men enrolled in the permanent diaconate formation program of the Archdiocese.

1.3 Lay Church Personnel (Laity)

- 1.3.1 Paid employees.
- 1.3.2 Volunteers age 18 or older that serves within the Archdiocese. For those volunteers whose duties include contact with minors and/or vulnerable adults, those volunteers will be required to undergo a Criminal Background Check in accordance with the policy set forth herein.
- 1.3.3 Independent contractors, including their employees and sub-contractors, with a ministerial role and access to children/youth and/or vulnerable adults.

1.4 Religious

1.4.1 Members of religious institutes, societies of apostolic life, or secular orders and movements, engaged in the care of souls, the public exercise of divine worship, or other works of the apostolate, with the Archbishop's consent, legitimately operating in the Archdiocese or living in the Archdiocese as retired.

2. Client

2.1 For the purposes of this Code, the terminology of "client" refers to the person receiving the service provided within the ministerial relationship.

3. Minor

3.1 Any person under the age of 18.

4. Vulnerable adult

- 4.1 While each of us can be vulnerable in any given set of circumstances, the phrase "vulnerable adults" has a particular definition for the purposes of this Code. In the Archdiocese of San Antonio, the terminology to the following:
 - 4.1.1 Persons 18 years of age and older, with physical, mental, emotional or behavioral conditions;
 - 4.1.2 Adults with an illness, or situation that renders an inability to defend, protect or get help when injured or abused;
 - 4.1.3 Individuals whose condition or disability impairs their ability to provide adequately for their own care, including adults who habitually lack the use of reason, along with individuals who have a court-appointed guardian;
 - 4.1.4 The elderly, whose various circumstances might make them susceptible to persons or situations that cause them harm, or individuals who are residents or patients within hospitals, group homes, nursing homes, day service facilities, day activity centers, adult foster-care homes or an adult who receives care services from a licensed home care or personal care service within their own homes.



For Church Personnel

5. Social Media

- 5.1 Social Media is defined as any form of electronic communication through which a user creates, utilizes, accesses, retrieves, and/or visits online communities or systems to share information, ideas, personal messages, and other content.
- 5.2 For the purposes of this Code of Conduct, Social Media is to encompass, but is not limited to, all of the following: email, texting, chat rooms, instant messaging, social networks, video messaging, on-line message boards, gaming systems, landline and mobile telephones, on-line voice communications, etc.

6. Ministerial Relationship

6.1 Any relationship between Church Personnel and a Client within the boundaries of ministerial work on behalf of the Archdiocese of San Antonio.

7. Sexual Misconduct

- 7.1 Any sexual conduct which is:
 - 7.1.1 Unlawful; or
 - 7.1.2 Sexual harassment; or
 - 7.1.3 a serious breach of the moral teachings, doctrines, or canon law of the Catholic Church.

8. Abuse of a Minor

Includes the following acts or omissions by any person:

- 8.1 Mental or emotional injury to a child that results in an observable and material impairment in the child's growth, development, or psychological functioning;
- 8.2 Causing or permitting the child to be in a situation in which the child sustains a mental or emotional injury that results in an observable and material impairment in the child's growth, development, or psychological functioning;
- 8.3 Physical injury that results in the substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child, including an injury that is at variance with the history or explanation given and excluding an accident or reasonable discipline by a parent, guardian, or managing or possessory conservator that does not expose the child to a substantial risk of harm:
- 8.4 Failure to make a reasonable effort to prevent an action by another person that results in physical injury that results in substantial harm to the child;
- 8.5 Sexual contact, sexual intercourse, sexual conduct, sexual penetration with a foreign object, incest, sexual assault, or sodomy inflicted on, shown to or intentionally practiced in the presence of a child if the child is present only to arouse or gratify the sexual desires of any person;
- 8.6 Failure to make a reasonable effort to prevent sexual contact, sexual intercourse, sexual conduct, sexual penetration with a foreign object, incest, sexual assault, or sodomy inflicted on, shown to or intentionally practiced in the presence of a child if the child is present only



For Church Personnel

to arouse or gratify the sexual desires of any person;

- 8.7 Compelling or encouraging the child to engage in sexual conduct; or
- 8.8 Causing, permitting, encouraging, engaging in, or allowing the photographing, filming, or depicting of the child if the person knew or should have known that the resulting photograph, film, or depiction of the child is obscene or pornographic.

9. Archdiocesan Review Board

- 9.1 An independent committee developed in adherence to Article 2 of the Charter for the Protection of Children and Young People and Norm 5 in the Essential Norms for Diocesan/Eparchial Policies Dealing with Allegations of Sexual Abuse of Minors by Priests or Deacons.
- 9.2 The Review Board will advise the Archbishop on his assessment of allegations of sexual abuse of minors and in his determination of a cleric's suitability for ministry.

IV. Pastoral Standards

1. Conduct for Church Personnel

- 1.1 Church Personnel must respect the rights and advance the welfare of each person.
- 1.2 Church Personnel must not step beyond their competence in ministerial situations and shall refer clients to other professionals when appropriate.
- 1.3 Church Personnel providing pastoral counseling must not record audio or video of the sessions or knowingly permit others to make audio or video recordings of the sessions. In the case that professional observation of the counselor is required, the client must sign a written consent form, and, if at all possible, the conversation should be conducted in an environment that allows for anonymous observation (i.e. within an office that includes an observation window or video conferencing capability).
- 1.4 Church Personnel must never engage in sexual intimacies with the persons to whom they minster. "Sexual intimacy" means physical sexual contact as well as inappropriate conversation, communication or body language of a sexual or perceived sexual nature. This guideline applies to both nonconsensual sexual intimacies and what might be considered consensual sexual contact.
 - 1.4.1 If, at any time, a client indicates an interest in establishing or pursuing an intimate relationship, or any relationship outside of ministry, the supervisor must be immediately notified, with the end goal of working together to decide an appropriate course of action to ensure that no relationship occurs.
 - 1.4.2 Church Personnel must avoid the appearance of inappropriate contact in their behavior, conversation, and other forms of communication.
- 1.5 Inappropriate physical contact of any kind (i.e., touching, kissing, holding) between Church Personnel and the persons to whom they provide ministry must be avoided. Church Personnel must maintain transparency in all interactions by ensuring that any contact is public, appropriate, and non-sexual (PAN). Behavior conducted by means of electronic methods of communication must also be appropriate and transparent. [See Section V.4]





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- 1.6 Ministries should be conducted in appropriate settings at appropriate times.
 - 1.6.1 No ministry may be conducted in private living quarters.
 - 1.6.2 Ministry must not be held at places or times (outside of acceptable ministry practices) that could cause confusion about the nature of the relationship for the person being counseled or for others in the environment.
 - 1.6.3 Church Personnel must always promote an atmosphere and attitude of openness and transparency when meeting with clients.
- 1.7 Church Personnel should strive to maintain an accurate record of the times and places of ministry, especially those events and appointments that are scheduled in advance, in-office appointments, regularly scheduled or recurring meetings and appointments, and, when feasible, impromptu meetings or counseling sessions.
- 1.8 Church Personnel must inform supervisors and/or other staff on the premises of oneon-one meetings with minors, and invite random visual observation or status checks even if the meeting is not on the organization's property. For example, being able to visually observe Church Personnel at all times from outside the room provides assurance that the interactions are appropriate to the relationship without compromising the privacy of the meeting.
- 1.9 Church Personnel must limit interactions between minors they are serving and other adults affiliated with the programs or agency while the minor is in ministry. Ensure that any contact with affiliated adults is also public, appropriate, and non-sexual (PAN).
- 1.10 Under no circumstances may a minor be placed in a supervisory role over other minors. It is the responsibility of adults to properly supervise the children in their care.

2. Confidentiality

Information disclosed to Church Personnel during the course of any ministry shall be held in the strictest confidence possible. **NOTE:** This Code of Conduct is independent of the inviolability of the sacramental seal attached to the Sacrament of Reconciliation.. It is absolutely forbidden for a confessor to betray in any way a penitent in words or in any manner and for any reason. Under no circumstances can there be any disclosure—even indirect disclosure—by priests of information received through the Sacrament of Reconciliation. The distinction between counseling and the Sacrament of Reconciliation must be maintained, therefore, priest-counselors are reminded that the proper place to hear sacramental confession is a church or oratory. Confessions are not to be heard outside a confessional without a just cause. (c. 964)

- 2.1 If pastoral care involves professional counseling, any information obtained in the course of a professional counselling session must be confidential, except as required by law.
 - 2.1.1 If there is clear and imminent danger to the client or to others, Church Personnel must disclose only the information necessary to protect the parties affected and to prevent harm.
 - 2.1.2 Before disclosure is made, if feasible, Church Personnel should inform the person being counseled about the disclosure and the potential consequences.
 - 2.1.3 Church Personnel must keep minimal records of the content of any counseling session.



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- 2.2 Church Personnel must discuss the nature of confidentiality and its limitations with each person in counseling. This includes telling the client from the beginning the circumstances under which confidentially is considered "waived" (i.e., risk of imminent danger to the client or others, reporting abuse as mandated by law, etc.).
- 2.3 Knowledge that arises from professional contact may be used in teaching, writing, homilies, or other public presentations **only** when effective measures are taken to absolutely safeguard both the individual's identity and the confidentiality of the disclosures.
- 2.4 **DUTY TO WARN**: If Church Personnel discovers that there is (a) a serious threat of imminent harm to a specific person, or (b) a serious threat to the welfare of a minor client and that communication of confidential information to a parent, legal guardian, person at risk, or law enforcement is essential to the health and well-being of the person at risk, Church Personnel must:
 - 2.4.1 Attempt to secure written consent from the client or adult guardian for the specific disclosure.
 - 2.4.2 If consent is not given, disclose only the information necessary to protect the health and well-being of the client and any other person at risk of harm.
- 2.5 Discussing confidential information with others. Church Personnel:
 - i. Will not discuss confidential client information with any unauthorized person (authorized persons include the clients and supervisors and/or any person authorized in writing by the client to receive the information.).
 - ii. Will not talk about confidential client information with anyone, including the client, in public places including elevators, reception areas, hallways, stairwells, and other open areas.
 - iii. Will not leave messages on cell phones or other answering machines regarding a client's confidential information or test results.
 - iv. Will verify an individual's identify and the 'need to know' before disclosing any confidential client information to any person or agency.
- 2.6 **DUTY TO REPORT**: Church Personnel must report any suspicion of child abuse. [See Section V. 2.5.1]

V. Standards of Appropriate Behavior

1. Conduct With Minors

When interacting with minors, Church Personnel must maintain open, transparent and trustworthy relationship.

- 1.1 Church Personnel must be aware of their own and others' vulnerability when working with minors, and should use a team approach to manage youth activities.
- 1.2 Physical contact with youth may only occur in public, and be appropriate and completely nonsexual (PAN). Physical contact must never occur in private. [For information on contact via electronic communication, See Section V.4]
 - 1.2.1 Except in emergencies, physical contact between adults and minors in professional relationships should be initiated by the minor. Adults must not



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generally initiate physical contact other than an occasional congratulatory pat on the upper back, hand shake, "high five," or other similarly appropriate contact. Church Personnel should be sensitive to whether this type of physical contact is welcomed by the minor and appropriate to their individual characteristics and cultural experience.

- 1.3 Church Personnel must not possess or use illegal drugs at any time and must not use alcohol when working with minors. The Archdiocese of San Antonio has a "No Tolerance" policy regarding the use or possession of illegal drugs and the use of alcohol when working with minors. Anyone found to be using, or in possession of illegal substances, will be terminated. Anyone using alcohol when working with minors will be subject to disciplinary action including possible termination or removal from ministry/service.
- 1.4 Church Personnel must not provide or allow others to provide shared, private overnight accommodation for an individual minor including, but not limited to, accommodations in any Church owned facility, private residence, hotel room, or any other place when no other adult is present. Church Personnel are not to share a private space with an individual minor in overnight accommodations without another adult present.

2. Sexual Conduct

Church Personnel must not exploit the trust placed in them by the faith community for any purpose, and particularly not for sexual gain or intimacy.

- 2.1 Clergy, Candidates for Ordination, and Religious who are committed to a celibate lifestyle are called to be an example of celibate chastity in all relationships at all times.
- 2.2 Church Personnel must never develop intimate relationships with minors, including online relationships. Church Personnel must act in a professional manner and be an example of Christian chastity at all times.
- 2.3 No Church Personnel may exploit another person for any purpose including a sexual purpose.
- 2.4 Allegations of sexual misconduct must be taken seriously and must be reported to civil authorities when the situation involves a minor.
- 2.5 The State of Texas mandates that any adult who suspects or is aware of abuse of a minor must report to Child Protective Services (1-800-252-5400) or to local law enforcement. [See also Section VI]
 - 2.5.1 Per Texas Family Code Sec. 261.101, "A person having cause to believe that a child's physical or mental health or welfare has been adversely affected by abuse or neglect by any person shall immediately make a report (to Child Protective Services (1-800-252-5400) or to local law enforcement). ... If a professional has cause to believe that a child has been abused or neglected or may be abused or neglected, or that a child is a victim of an offense under Section 21.11, Penal Code, and the professional has cause to believe that the child has been abused as defined by Section 261.001, the professional shall make a report not later than the 48th hour after the hour the professional first suspects that the child has been or may be abused or neglected or is a victim of an offense under Section 21.11, Penal Code. A professional may not delegate to or rely on another person to make the report. ... "Professional" means an individual who is licensed or certified by the state or who is an employee of a facility licensed, certified, or operated by the state and who, in the





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normal course of official duties or duties for which a license or certification is required, has direct contact with children. The term includes teachers, nurses, doctors, day-care employees, employees of a clinic or health care facility that provides reproductive services, juvenile probation officers, and juvenile detention or correctional officers. ... A person or professional shall make a report ... if the person or professional has cause to believe that an adult was a victim of abuse or neglect as a child and the person or professional determines in good faith that disclosure of the information is necessary to protect the health and safety of: (1) another child; or (2) an elderly person or person with a disability. ... The requirement to report under this section applies without exception to an individual whose personal communications may otherwise be privileged, including an attorney, a member of the clergy, a medical practitioner, a social worker, a mental health professional, an employee or member of a board that licenses or certifies a professional, and an employee of a clinic or health care facility that provides reproductive services."

3. Harassment

Church Personnel must not engage in physical, psychological, written, or verbal harassment of Church Personnel, or parishioners and must not tolerate such harassment by other Church Personnel.

- 3.1 Church Personnel must provide a professional work environment that is free from physical, psychological, written, or verbal intimidation or harassment.
- 3.2 Harassment encompasses a broad range of physical, written, or verbal behavior, including without limitation the following:
 - 3.2.1 Physical or mental abuse.
 - 3.2.2 Racial insults or discriminatory practices.
 - 3.2.3 Derogatory ethnic slurs.
 - 3.2.4 Disparaging remarks and treatment because of disability.
 - 3.2.5 Provoking bullying and ridicule as a result of illegal disclosure of medical information.
 - 3.2.6 Unwelcome sexual advances or touching, including, but not limited to grabbing, patting, and pinching.
 - 3.2.7 Sexual comments or sexual jokes.
 - 3.2.8 Requests for sexual favors used as:
 - i. A condition of employment;
 - A condition for favorable personnel decisions, such as promotion or compensation; or
 - An agreement to provide or continue professional counseling or pastoral services.
 - 3.2.9 Display of offensive materials including sexually suggestive objects and/or pictures.





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- 3.3 Harassment can be a single severe incident or a persistent pattern of behavior where the purpose or the effect is to create a hostile, offensive, or intimidating work or professional environment.
- 3.4 Allegations of harassment must be taken seriously. Church Personnel that witness or are reasonably certain that harassment has occurred or is occurring must follow the procedure for reporting in Section VI.2. [See Section VI.2]

4. Electronic Communication

- All information and messages that are created, sent, received or stored using Archdiocese of San Antonio communication assets are the sole property of the Archdiocese of San Antonio, and no user has any ownership interest or expectation of privacy in such communications. The Archdiocese of San Antonio retains the right, in its sole discretion, to review all information or communications sent, received, stored, or posted using Archdiocese of San Antonio communication assets. The Archdiocese of San Antonio retains the right to track Internet site, chat room and newsgroup visits, as well as file downloads that occur through Archdiocesan communication assets. The Archdiocese of San Antonio has the right to conduct such review without prior notice to the employee. The user consents to allow Information Technology and Archdiocese of San Antonio access to, and review of, all materials created, stored, sent or received, by the user through any Archdiocese of San Antonio network or Internet connection. Employees may not intercept or disclose, or assist in intercepting or disclosing, electronic communications.
- 4.2 Any content posted or communicated online by Church Personnel must reflect Catholic teachings and values. In online communication, Church personnel should not to imply that they speak on behalf of the Archbishop of San Antonio or the Archdiocese of San Antonio except in the specific capacity of their ministry for which they have permission to post.
- 4.3 Further advancements in technology may require periodic updates and addendums to this section of the Code of Conduct. The universal principles provided for are to be applied prudently and judiciously in the event an update has not occurred.

5. Electronic Communication with Minors

All decisions related to electronic communication with minors must be made by Clergy, or supervisor. No individual Church Personnel may use electronic communication with minors who participate in any of this organization's activities without written permission from both the organization's leadership and the minor's parents or guardians.

- 5.1 No Church Personnel shall collect email addresses, phone numbers or any other account access information for any medium of online communication, from minors without written permission from parents or guardians.
 - 5.1.1 Parents or guardians must designate, in writing, which form(s) of one on one communication with children may be used and must provide the contact information.



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- 5.1.2 In the case of elementary and middle school age children, parents or guardians should always be contacted directly.
- 5.1.3 In the event of any direct communication between Church Personnel and minors, parents and/or guardians **must be copied** on the content of the communication.
- 5.2 Electronic communication must be brief and on topic using language appropriate for communicating with the minor and his or her parent or guardian. Additionally, all communication must conform to the Archdiocese of San Antonio's *Code of Conduct* and Safe Environment policies, practices, and training. Communication that disregards or violates the *Code of Conduct* standards in any way will not be tolerated regardless of the medium used for conveyance.
- 5.3 Except in an emergency, all communication (including electronic) between Church Personnel and any program services participant must take place between the hours of 7:00 a.m. and 9:00 p.m. including posting to websites and social networking sites.
- Appropriate behavioral boundaries that apply in face-to-face or verbal communication also apply to any electronic communications with minors.
- 5.5 The following guidelines apply to specific forms of electronic communication:
 - 5.5.1 Cell phones, texts, Twitter, Instagram and other Messaging services:
 - i. Church Personnel will use office lines to conduct conversations with clients unless approved by a supervisor.
 - Except in case of an emergency, Church Personnel will not call minors directly (on the minor's cell phone), and will instead contact parents or call family phones.
 - ii. Church Personnel will not share personal cell phone numbers with minors unless approved by parents, quardians, and administrators.
 - W. Church Personnel will not communicate with minors by text or other electronic messaging service (Exception: A one-one-one messaging option on a group page sponsored by the Archdiocese of San Antonio).

5.5.2 Email

- Church Personnel must avoid using personal email accounts to contact minors. In situations where an official Archdiocese of San Antonio email account cannot be used, approval from a supervisor must be obtained prior to using a personal email address to contact a minor for Archdiocesan purposes.
- i. Church Personnel must copy parents or guardians on all email communications. If copying parents or guardians is not possible or not recommended, copy a supervisor or administrator. Church Personnel within a Catholic School may email a student who has a school email address without also contacting a parent/guardian or supervisor.
- Church Personnel must not add any minor to personal email lists.
- When sending emails to a group, Church Personnel must use an approved email distribution application (ex: Constant Contact) or use the blind copy option (bcc) in order to keep email addresses confidential.

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v. If, at any time, Church Personnel receive an inappropriate personal communication from anyone participating in or affiliated with the Archdiocese of San Antonio the individual must notify a supervisor immediately.

5.5.3 Social Networking Sites and Apps

- Church Personnel must not use their personal social networking account, handle, or profile to contact minors. The individual parish or agency can create their own social media page or account strictly for agency related communications. These accounts must be approved in advanced by the appropriate supervisor, registered with the parish or agency, and labeled to reflect their official nature. More than one individual must have oversight over the content and internal messaging, although passwords and administrative authority for such pages should be limited to the pastor, supervisor, or their designee.
- No personal contact information may be provided in profiles or the accounts used on behalf of the representative of the Archdiocese of San Antonio.
- Only official email addresses, office phone numbers, and job titles may be used.
- M. All accounts must be set to maximize privacy. Parishes and agencies may publicize their presence on social media. However, no effort should be made to exclusively seek out minors as participants on the sites.
- Church Personnel must ignore "friend requests" from minors that are addressed to the adult's personal social media account/application.
- No pictures may be posted without written permission from all individuals appearing in the photo (for minors, this would be the parent or guardian), and persons may not be tagged or identified in a photo.
- Church Personnel shall comment only on services or ministry-related threads from the ministry-related account.
- viii. Church Personnel may not use instant messaging programs on social networking sites or messaging applications for professional, ministry related purposes to communicate with minors, unless the material has prior approval by a supervisor and is recorded and kept on file.
- Supervisors and/or their designees must monitor sponsored sites. Inappropriate posts should be promptly removed/deleted.
- Monitoring responsibility also applies to any unofficial site created by third parties about the program or services that come to the attention of Supervisors and/or their designees. If inappropriate content is present, monitors must report the pages/groups/users to the hosting site and ask that the site be removed. This includes but is not limited to unauthorized use of logos, bullying, harassment, or defamatory language.

6. Criminal Background Check

6.1 Clergy, Candidates for Ordination, and Employees are required to undergo a criminal background check in accordance with the Norms Governing Criminal Background Checks and is required to be renewed every three (3) years. Additionally, Lay Church Personnel with contact with minors or vulnerable populations are also required to undergo a criminal background check in accordance with the Norms Governing Criminal Background Checks and is required to be renewed every three (3) years.

7. Safe Environment Training





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- 7.1 Clergy, Candidates for Ordination, and Employees shall participate in Adult Safe Environment Training and learn the behavioral warning signs of potentially risky adults. Additionally, Lay Church Personnel with contact with minors shall participate in Adult Safe Environment Training and learn the behavioral warning signs of potentially risky adults. Employees should receive the training within thirty (30) days of commencing employment and volunteers should receive training prior to participating in a ministry. Training must be renewed every three (3) years.
- 7.2 Minors enrolled in religious education classes or in catholic schools must also receive Safe Environment on a yearly basis. The Office of Victim Assistance and Safe Environment (OVASE) will determine the requirements for Safe Environment training mandated in religious education classes. The Department of Catholic Schools will determine the requirements for Safe Environment training mandated in Catholic schools in the Archdiocese of San Antonio.

8. Sexual Harassment Training

8.1 Clergy, Candidates for Ordination, Employees, and Lay Church Personnel must complete Sexual Harassment Training through Virtus. Employees should receive the training within thirty (30) days of commencing employment and volunteers should receive training prior to participating in a ministry. Training must be renewed every three (3) years.

9. Vulnerable Adult Training

9.1 Clergy, Candidates for Ordination, Employees, and Lay Church Personnel who have contact with vulnerable adults must complete Vulnerable Adults Training through Virtus. Employees should receive the training within thirty (30) days of commencing employment and volunteers should receive training prior to participating in a ministry. Training must be renewed every three (3) years.

10. Monitoring Behavior

Church Personnel must monitor their own behavior and the behavior of all others in the agency to prevent, recognize, and respond to risky, inappropriate, and harmful behaviors and to reinforce, acknowledge, and appreciate appropriate behavior.

- 10.1 Church Personnel must continuously observe interactions between adults and youth and youth and other youth in the agency and/or environment and react appropriately.
- 10.2 Church Personnel must be clear about the established behavioral standards for the Archdiocese of San Antonio set out in the applicable Code of Conduct and be able to identify any actions in violation of those standards. It shall be the responsibility of all Church Personnel to maintain a "healthy suspicion" of all adults in the environment and to watch for the potentially risky behaviors outlined in this Code of Conduct.
- 10.3 Church Personnel must report concerns about possible inappropriate behavior or activities according to the procedure in Section VI. [See Section VI].



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11. Conflicts of Interest

Church Personnel must avoid situations that might present a conflict of interest. Even the appearance of a conflict of interest can call integrity and professional conduct into question.

- 11.1 Church Personnel must inform all parties in writing when a real or potential conflict of interest arises. Resolution of the issues must protect the person receiving ministry services.
 - 11.1.1 No Church Personnel must take advantage of anyone to whom they are providing services in order to further their personal, religious, political, or business interests.
 - 11.1.2 Church Personnel must not provide counseling services to anyone with whom they have a business, professional, or social relationship. When this is unavoidable, the client must be protected. Church Personnel must establish and maintain clear, appropriate boundaries.
 - 11.1.3 When pastoral counseling or spiritual direction services are provided to two or more people who have a relationship with each other, Church Personnel must:
 - i. Clarify with all parties the nature of each relationship;
 - i. Anticipate any conflict of interest;
 - Take appropriate actions to eliminate the conflict;
 - iv. Obtain from all parties written consent to continue services; and
 - Provide documentation of these conversations to the program or agency supervisor.
- 11.2 Conflicts of interest may also arise when Church Personnel's independent judgment is impaired by (a) prior dealings, (b) becoming personally involved, or (c) becoming an advocate for one (person) against another. In these circumstances, Church Personnel must advise the parties that he or she can no longer provide services and refer them to other Church Personnel or to the agency's supervisor for reassignment.

12. Administration

Employers and supervisors shall treat Church Personnel justly in the day-to-day administrative operations of their ministries.

- 12.1 Personnel and other administrative decisions made by Church Personnel shall meet civil and canon law obligations and also reflect Catholic social teachings and this *Code of Conduct*. Church Personnel should seek information and advice from supervisors or other experts within the Archdiocese of San Antonio
- 12.2 Church Personnel must not use his or her position to exercise unreasonable or inappropriate power and authority.

13. Church Personnel Well-being

Church Personnel have the duty to be responsible for their own spiritual, physical, mental, and emotional health.





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- 13.1 Church Personnel must be aware of warning signs that indicate potential problems with their own spiritual, physical, mental, and/or emotional health.
- 13.2 Church Personnel must seek help immediately whenever they notice behavioral or emotional warning signs in their own professional and/or personal lives.
- 13.3 Church Personnel must address their own spiritual needs. Support from a Spiritual Director is highly recommended.
- 13.4 Inappropriate or illegal use of alcohol and drugs is prohibited.

VI. Reporting

1. Reporting an allegation of Abuse of Minors or Vulnerable Adults

- 1.1 All allegations of Abuse of Minors or Vulnerable Adults will be taken seriously.
- 1.2 If the alleged victim is currently a minor or a vulnerable adult;
 - 1.2.1 In accordance with Texas Law, any citizen who has cause to believe a minor or vulnerable adult is being, or may have been abused, is required to report the information to the Texas Department of Family and Protective Services (TDFPS) or local law enforcement. TDFPS maintains a 24hr hotline at 1-800-252-5400; or a report can be made online at www.txabusehotline.org.
 - 1.2.2 Contact the Archdiocesan Misconduct Hotline (AMH) 844-709-1169 or make a report via the internet by following the links at www.archsa.org.
 - 1.2.3 The AMH will create an intake and will notify the Office of Victim Assistance & Safe Environment (OVASE).
 - 1.2.4 OVASE will contact the reporting individual(s) and will offer to provide pastoral care.
 - 1.2.5 For allegations involving clergy:
 - OVASE will notify the Archbishop or his designee, the Office for Clergy, and will verify that local law enforcement is notified.
 - The Archbishop or his designee will notify the Archdiocesan Review Board.
 - 1.2.6 For allegations involving church personnel, OVASE will notify Human Resources and the immediate supervisor of the person being accused.
 - 1.2.7 The investigation of allegations of abuse is the responsibility of local law enforcement. Church Personnel should not conduct any investigation of abuse unless directed to do so by local law enforcement.
 - 1.2.8 The accused should be placed on administrative leave pending the investigation. Administrative leave may be paid or unpaid at the discretion of the supervisor of the accused. In the event the administrative leave is paid, four weeks paid leave is the maximum available. Payment shall not exceed an amount equal to four (4) weeks pay.



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- 1.2.9 For disciplinary outcomes see Section VII.
- 1.3 If the alleged victim at the time of the report is an adult (not vulnerable)
 - 1.3.1 Contact the Archdiocesan Misconduct Hotline (AMH) 844-709-1169 or make a report via the internet by following the links at www.archsa.org.
 - 1.3.2 The AMH will create an intake and will notify the Office of Victim Assistance & Safe Environment (OVASE).
 - 1.3.3 OVASE will contact the reporting individual(s) and will offer to provide pastoral care.
 - 1.3.4 For cases not involving clergy, OVASE will encourage the alleged victim to contact law enforcement.
 - OVASE will notify the supervisor of the Church Personnel and the Human Resources office.
 - 1.3.5 For cases involving clergy, OVASE will inform the reporting individual(s) of his/her rights to legal counsel, to contact local law enforcement, and to meet with the Archbishop or his designee.
 - OVASE will notify the Archbishop or his designee.
 - i. The Archbishop or his designee will notify the Bexar County District Attorney of the allegation.
 - The Archbishop or his designee will call upon the Archdiocesan Review Board for assistance in determining the need for an investigation. If needed, the Archdiocesan Review Board will call upon an independent investigator to conduct an investigation.
 - iv. The Archdiocesan Review Board and the Archbishop will determine the cleric's suitability for ministry during the investigation process.
 - The allegation will be investigated in accordance with the Essential Norms for Clergy of the Charter for the Protection of Children and Young People, and the Archbishop, in reaching His final decisions, shall be guided by the appropriate norms of canon law.
 - 1.3.6 For disciplinary outcomes see Section VII.

2. Reporting an allegations of Sexual or Non-Sexual Misconduct

- 2.1 If you are aware of any Church Personnel involved in Misconduct within the Archdiocese of San Antonio, contact the Archdiocesan Misconduct Hotline (AMH) 844-709-1169 or make a report via the internet by following the links at www.archsa.org
- 2.2 The AMH will create an intake and will notify the appropriate Archdiocesan Office.
- 2.3 If deemed necessary, an independent investigator will be asked to conduct a





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thorough investigation.

- 2.4 The investigation will consist of interviews with all parties and any possible witnesses.
- 2.5 At the time of the investigation, the Archdiocese may:
 - 2.5.1 Temporarily remove clergy from public ministry;
 - 2.5.1 Place an employee on administrative leave with or without pay (payment shall not exceed the time period of four (4) week's pay); and
 - 2.5.2 Temporarily remove a volunteer from ministry.
- 2.6 The investigation will be documented and stored in the personnel file of the individual that is the subject of the investigation.
- 2.7 A determination for suitability for continued employment/ministry will be made based on the investigation.
- 2.8 For disciplinary outcomes see Section VII.
- 2.9 The individual(s) who brought forth the complaint may seek counseling through the Office of Victim Assistance & Safe Environment.

3. Retaliation

3.1 The Archdiocese of San Antonio prohibits any act of retaliation against anyone who reports discrimination or harassment or who cooperates in an investigation of a complaint. The Archdiocese will preserve confidentiality to the extent the needs of the investigation permit. Any person found to have engaged in retaliatory conduct against any person reporting a violation of this Code of Conduct or civil law or any Church Personnel who does not fully cooperate with an investigation of a complaint will be subject to discipline, up to and including termination of employment or removal from ministry/service.

VII. Discipline Procedures

The standard of review for decisions regarding discipline following investigations of allegations, incidents or concerns of sexual misconduct or sexual harassment, is held at the absolute discretion of the decider.

- 1.1 In cases where abuse of a minor is alleged against a cleric, the provisions of universal and particular ecclesiastical law and the Essential Norms for Clergy of the Charter for the Protection of Children and Young People will govern the preliminary investigation and the subsequent actions or processes.
- 1.2 Procedures for discipline of clergy will be consistent with these policies and the appropriate norms of canon law.
- 1.3 Church Personnel in any formal disciplinary process are ineligible for transfers within the Archdiocese if their work is with minors or vulnerable adults.
- 1.4 When the conduct of Church Personnel does not meet the standards of the Code of



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Conduct, it is the responsibility of the pastor, principal, supervisor, Human Resources, or Catholic Schools Office to address the problem(s) in a timely and equitable manner. The discipline procedure may include any of the following options:

- 1.4.1 Counseling;
- 1.4.2 Formal warning;
- 1.4.3 Probation;
- 1.4.4 Suspension; or
- 1.4.5 Termination.
- 1.5 Counseling for sexual misconduct or sexual harassment will be conducted by the Office of Victim Assistance & Safe Environment. Documentation of the counseling will be maintained and kept in the personnel file of the individual who received the counseling.



For Church Personnel

Code of Conduct Acknowledgement Receipt

For Church Personnel

Acknowledgement of Receipt

The purpose of this Code of Conduct is to make clear to clergy, employees and volunteers that certain behaviors are required and certain behaviors are unacceptable, and to ensure proper monitoring of all youth. The following is the official receipt denoting that the individual whose signature appears below has read and understands the policies contained in the attached Code of Conduct document.

Please complete, sign, detach this entire page from full packet, and submit:

I have read and understand the policies contained in the attached Code of Conduct, and I intend to follow these policies and to monitor and protect children and young people in my service to the Archdiocese of San Antonio. I understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in my removal as a volunteer or employee.

Full legal name (please print)			
Signature	Date		
Position	on / Ministry		
Email or phone number	Parish / School / Organization		

Please complete this page, sign it, detach it from the full packet and return it to the Archdiocese of San Antonio. This sheet will be kept on file at the Archdiocese of San Antonio indefinitely.

Office Use Only				
Date submitted / processed:	Received by (name):			
Notes:				