

Child & Youth Protection Policy

Somerset Church of Christ

Adapted with permission by the Mountville Mennonite Church

2014-15 Child & Youth Protection Team: Jimmy Hinton, minister, Mary Ann Riggs, Jen Riggs

Theological Foundations:

We believe that each person is created in the image of God and so deserves care, respect, and honor. God calls us to share our lives together in the Church, which is also described as a body in Scripture.¹ In this body, each person is valuable and indispensable.

We recognize that our sinfulness can blind us to the importance of others, particularly vulnerable people such as children. Their voices are often silenced, distorted, or not heard at all. Yet Jesus' words ring in our ears, "Let the little children come to me, and do not hinder them, for the Kingdom of God belongs to such as these."² Since we desire to follow Jesus, we also seek to welcome and care for children and other vulnerable people God has created.

We want Somerset Church of Christ's building to serve as a sanctuary, a refuge for all people, where grace is extended and received. Jesus invites all people to come and follow, so we long for all people to find a home among God's people. Since the Church serves as a representation of God's Kingdom, we are called as Christ's ambassadors to make this building a place of shalom, a place where God's peace reigns.

Yet the Church is not a building. We, God's people, are the Church. So, wherever we go, we want to bring the good news that all people are valuable.

We believe that God's healing and hope happens best in safe spaces. We want Somerset Church of Christ to serve as a sanctuary where God's grace can flow into people's lives, where God transforms people into more of whom God created them to be, so that God is glorified.

This policy outlines the church's expectations for appropriate behavior regarding the care and supervision of children and youth. We desire Somerset Church of Christ to be a safe place where abusive words and actions are not tolerated and where staff and volunteers who work with children and youth are protected from false or wrongful allegations.

Definitions:

Child Sexual Abuse is any contact or interaction between a person who is a minor or who is legally incompetent, and an adult, when the child is being used for the sexual stimulation of the

¹ 1 Corinthians 12:12-31. All Scripture references are from Today's New International Version (TNIV).

² Luke 18:16.

adult person or of a third party. The behavior may or may not involve touching. Sexual behavior between a child and an adult is always considered to be forced, whether or not consented to by the child. Currently, in the state of Pennsylvania, anyone younger than 18 years of age is considered to be a child.

Although this policy focuses primarily on child sexual abuse, all forms of child abuse are prohibited, and are included under this policy. Definitions of abuse from the **Pennsylvania Child Protective Services Law (CPSL [Title 23 PA.C.S. Chapter 63])**, are as follows:

A) Any recent act or failure to act by a perpetrator which causes non-accidental serious physical injury to a child.

- *Serious bodily injury* means bodily injury that creates a substantial risk of death or causes serious permanent disfigurement or protracted loss or impairment of function of any bodily member or organ.
- *Serious physical injury* means an injury that causes a child severe pain or significantly impairs a child's physical functioning, either temporarily or permanently.

B) An act or failure to act by a perpetrator which causes non-accidental serious mental injury to a child.

Serious mental injury means a psychological condition, as diagnosed by a physician or licensed psychologist, including the refusal of appropriate treatment, that:

- Renders a child chronically and severely anxious, agitated, depressed, socially withdrawn, psychotic, or in reasonable fear that his or her life or safety is threatened
- Seriously interferes with a child's ability to accomplish age-appropriate development and social tasks

C) Sexual Abuse or Exploitation: (1) The employment, use, persuasion, inducement, enticement, or coercion of a child to engage in or assist another individual to engage in sexually explicit conduct. (2) The employment, use, persuasion, inducement, enticement, or coercion of a child to engage in or assist another individual to engage in simulation of sexually explicit conduct for the purpose of producing visual depiction, including photographing, videotaping, computer depicting, and filming. It also includes any of the following offenses committed against a child: rape, sexual assault, involuntary deviate sexual intercourse, aggravated indecent assault, molestation, incest, indecent exposure, prostitution, sexual abuse, or sexual exploitation.

D) Endangering Welfare of Children: A recent act, failure to act or series of the acts or failures to act by a perpetrator which creates an imminent risk of serious physical injury to or sexual abuse or exploitation of a child. A parent, guardian, or other person supervising the welfare of a child less than 18 years of age, or a person that employs or supervises such a person commits an offense if he knowingly endangers the welfare of the child by violating a duty of care, protection, or support.

E) Serious physical neglect by a perpetrator constituting prolonged or repeated lack of supervision or the failure to provide the essentials of life, including adequate medical care, which endangers a child's life or development or impairs the child's functioning.

- A child will not be deemed to be physically or mentally abused based on injuries that result solely from environmental factors that are beyond the control of the parent or person responsible for the child's welfare, such as inadequate housing, furnishings, income, clothing and medical care.

Any recent act or failure to act is defined as occurring within the last two years.

Sexual Harassment is a form of sex discrimination prohibited by Title VII of the Civil Rights Act of 1964. It consists of inappropriate verbal or physical conduct of a sexual nature that has the purpose or effect of unreasonably interfering with an individual's sense of well-being by creating an intimidating, hostile, or offensive environment from the viewpoint of the affected individual. The Pennsylvania Human Relations Act defines it as follows:

Unwelcome sexual advances, requests for sexual favors, constitute sexual harassment when (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment, (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Although in a legal sense, the term "sexual harassment" deals with the workplace, the sexual harassment of anyone – including all adults and children – is prohibited in this church.

Sexual Misconduct includes: child sexual abuse (defined above); sexual harassment (defined above); rape and sexual contact by force, threat or intimidation; sexual behavior, which includes but is not limited to offensive, obscene, or suggestive language or conduct; unacceptable visual contact; and touching or fondling which is injurious to the physical or emotional health of another. Sexual misconduct directed toward a person of any age is prohibited in this church.

An **Approved Adult** is anyone at least 18 years of age who has satisfied the requirements of this Child Protection Policy. An Approved Adult can be an employee or non-employee of the congregation. Approved Adults include, but are not limited to all staff, Sunday School teachers, Children's Church leaders, youth group leaders, hall and foyer monitors, and nursery volunteers. For VBS, each station will have at least one Approved Adult and each group of rotating crews will have at least one Approved Adult.

Child & Youth Protection Team (CYPT) – Implements and enforces the Child & Youth Protection Policy at Somerset Church of Christ.

The CYPT shall consist of a minister, a deacon or spouse of a deacon, and a church member who has experience working in any professional field with victims of abuse. At least one team member should be a parent of a minor who attends Somerset Church of Christ. All members of the committee will be approved by the Elders.

This team of committed people will:

1. Implement and enforce this Child & Youth Protection Policy.
2. Review and make recommendations to the elders and deacons for revising congregation policy regarding the safety of our children/youth.
3. Provide up-to-date training for all staff and Approved Adults working with the children/youth regarding child abuse and the Child & Youth Protection Policy.
4. Maintain a list of Approved Adults and disseminate within the church community.
5. Monitor Approved Adults to ensure that policies are being followed.
6. Keep elders informed of all activities of the committee.
7. Be kept informed of investigations.

The Church Secretary, with the assistance of a minister at Somerset Church of Christ, will:

1. Review all applications, making sure they are completed for the elders to approve.
2. Collect and forward requests for clearances, with cover letters, to PA State Police and PA Department of Public Welfare; as well as FBI Fingerprint clearances for staff.

A minister at Somerset Church of Christ will:

1. Maintain all clearances.
2. Receive and process reports of suspected abuse.
3. Make available, upon request of an individual, his/her clearance reports.

The CYPT Chair will be approved by the elders and will:

1. Ensure that required forms are received for all applicants and proper records are maintained.
2. Call meetings as often as needed, but no less than once each year

Policies and Procedures:

Selection of Approved Adults

To protect the children/youth in our care, the following guidelines are established for those who desire to work with children/youth less than 18 years of age.

Approved Adults must:

1. Be at least 18 years old.
2. Attend Somerset Church of Christ for a minimum of 6 months or be a staff member.
Volunteers who have attended for fewer than six months may work with children if an

Approved Adult is also present, and they submit a recommendation from their previous minister or elders.

3. Complete an Approved Adult application form (see appendix).
4. Sign and comply with the Child Protection Covenant (see appendix).
5. Complete the required clearance forms: 1) Pennsylvania State Police Request for Criminal Record Check, and 2) PA Child Abuse History Clearance Form (see appendix). Clearances are required for all applicants.
6. Attend a standard initial training session which will cover the:
 - Child & Youth Protection Policy,
 - Procedures to follow for all children and youth activities,
 - Appropriate steps to report an incident of child abuse, and
 - PA state laws regarding child abuse.

Required Clearances

Church volunteers are not required by the Child Protective Services Law (CPSL) to obtain background checks. However, most churches, including Somerset Church of Christ, have policies requiring volunteers to obtain the following clearances:

Child Abuse History Clearance Form (CY-113)

Pennsylvania State Police Request for Criminal Record Check Form (SP4-164)

These background checks will be repeated every 5 years and after a break in attendance of more than 18 months.

Prospective employees applying to engage in occupations with a significant likelihood of regular contact with children, in the form of care, guidance, supervision or training must obtain background checks as a condition of employment. This would include (for example) a Minister, Youth Minister, and other church staff expected to have regular contact with children.

In addition, paid church staff hired July 1, 2008 and after with a significant likelihood of contact with children must also obtain FBI clearance (fingerprinting) in addition to the above background checks. The congregation will pay for these clearances and for the clearances required for Approved Adults.

See https://www.pa.cogentid.com/index_dpw.htm (COGENT) to locate a fingerprint processing center near our church.

Records

Applications and related forms for staff and volunteers will be locked in a confidential file under the jurisdiction of the elders of the Somerset Church of Christ. Clearances are confidential and will only be made available to current minister and elders of the congregation.

The designated Minister on the CYPT will follow these recordkeeping steps:

1. Create and maintain a master list of all staff and volunteers who have regular contact with children in the course of their work.
2. Determine which reports the congregation possesses, and note the dates of the reports on the list;
 - For staff and volunteers who have the required background check reports and those reports are less than five (5) years old, no new reports are required until five (5) years from the date of the existing reports.
 - For such staff and volunteers who do not have the required background check reports, or in cases where the required reports are over five (5) years old, new reports are required.
3. Note on the list when the reports need to be renewed, and note on the list the date 60 days before to initiate the process of obtaining renewed reports
 - New reports are to be obtained every five (5) years from the date of the existing reports.
 - New reports are required for all staff and volunteers who have had an 18-month break in attendance.
4. Retain copies of all reports, even ones that are superseded by renewed reports, in confidential locked files.

General Guidelines for Protection of Children and Youth

To ensure that a nurturing Christian environment for children/youth is maintained within the congregation, to protect children/youth who participate in activities sponsored by the church from sexual, mental, and/or physical abuse, and to protect the congregation's members from false allegations of abuse, the congregation has adopted the following policy:

1. **Child Abuse Prohibited:** Those who accept the special responsibility of working with the congregation's children/youth shall not violate that responsibility by causing physical injury, which is non-accidental; mental injury, which is non-accidental; sexual abuse or serious physical neglect of children/youth.
2. **Sexual Abuse Prohibited:** Those who accept the special responsibility of working with the congregation's children/youth shall not violate that responsibility by having any interaction with a child/youth where the child/youth is being used for sexual stimulation of the adult or a third person regardless of whether or not the behavior involves touching.
3. **Two Approved Adults Rule:** Two Approved Adults should be present during any church sponsored children/youth activity. In a mixed group, whenever possible, a male and a female Approved Adult should be present. If two Approved Adults are not available during Sunday School, in the nursery, or during Children's Church, the door to the room must be left open at all times. A designated Approved Adult will circulate outside the classroom or nursery area and be within easy reach to provide assistance if needed.

4. **Visibility:** All activities/meetings with children/youth must be conducted in a way that allows visibility, e.g., glass areas of doors should not be obstructed, curtains/blinds should be open, when possible, door should be open or a window should allow easy observation of the room. Where possible, conduct activities in a public place, with another person within sight and sound of the activities.

Because abuse is sometimes perpetuated by an older, stronger child/youth, do not send two children/youth with a four or more year age difference to an isolated setting, e.g., bathroom, tent, empty classroom.

5. **Bathroom and Diapering**

In general, children should be encouraged to use the bathroom before and after classes or other activities. In this way parents can assist as needed

If you need to take a child to the toilet, be aware of your visibility and the child's privacy, e.g., adult stands holding public bathroom door open while child enters toilet stall alone.

Diapering: Two Approved Adults or one Approved Adult with a youth nursery worker must be present when clothes or diapers are being changed. A parent can also be recruited to change clothes or a diaper for their own child.

Two and Three Year Olds: An Approved Adult must accompany children to and from the bathroom and inform another adult when this takes place. The adult will assist the child only when necessary. If assistance is needed, the adult must leave the stall/bathroom door open.

6. **Empty Room Policy**

After an activity, check rooms to ensure that all participants have vacated the room. Empty rooms will be kept locked at all times.

7. **Expressions of Affection**

True expressions of affection toward children/youth can be a manifestation of Christ's love for all of us. A kind word of encouragement to a child/youth or a pat on the back can be a small but significant act for both the adult and the child/youth. That being said, adults must use caution and common sense when physically expressing affection toward children/youth.

a. Respect a child's/youth's refusal of affection.

b. Be aware of appropriate hand placement. A child/youth or an observer could misinterpret a pat on the bottom or a bear hug. Note that a touch on private areas (those areas covered by a bathing suit) or a kiss on the mouth is unacceptable.

c. Discipline of any type involving physical contact is not permitted.

8. Permission Slips:

General-Children/youth must have permission to participate in activities.

Parents/guardians need to fill out and sign a general consent form and a Medical Release Form, which includes pertinent medical information and emergency phone numbers (see appendix). These forms will be updated every year and filed in the church office.

Specific-Children/youth not accompanied by a parent must have permission to participate in any overnight activity or any activity that takes place away from church grounds. The permission must be written, signed by a parent or guardian, and must identify the activity in which the child/youth will be participating. The Minister on the CYPT may waive the requirement for permission slips where a permission slip serves no useful purpose (for example when a child/youth is accompanied by his or her parent or guardian to the activity).

- 9. Medical Release Forms for field trips:** All youth participating in a youth group or going on a field trip with either a youth group or the Sunday School, must have a Medical Release Form on file before they will be allowed to participate.
- The form must be completed by parents/guardians and returned to the Church Secretary.
 - A copy of the completed form will be kept on file in the church office.
 - Each time a field trip or overnight event occurs, the original must be taken with an adult leader while a copy remains in the church office.
- 10. Overnight Activities:** Overnight activities involving children/youth shall be chaperoned by at least two Approved Adults. Boys and girls will sleep in separate areas with at least two Approved Adults of the same gender directly supervising each group. If the minimum level of supervision cannot be achieved, the activity must be cancelled.
- 11. Transportation of Children/Youth:** When children/youth are transported for church activities, they shall be transported in groups with at least one Approved Adult in each vehicle. This does not include transportation to and from Somerset Church of Christ, or another designated meeting point, which is the responsibility of the parent/guardian. If necessary, a student may drive himself or herself and take student passengers to youth activities if a written request from all parents involved is granted by the Elders.

12. Personal Vehicle Transportation. To transport children/youth in a personal vehicle, the driver must be 19 years of age or older. Drivers must have a copy of their driver's license, registration, and proof of insurance on file in the church office. This will be updated on a yearly basis. Anyone who has had their license revoked or suspended within the past five years will be ineligible to drive for youth activities.

Appropriate Supervision Ratios

Overnight activities on or off church property:

Ratios of adults to children/ youth

Grade	Maximum number of Youth	Number of Approved Adults required	Plus one additional adult for each additional number of youth
Pre-school - 3	4	2	4
4 – 5	6	2	4
6 - 12	6	2	6

Key Policy

Any person who seeks possession of a key to the church will have a clearly stated reason for needing a key and will be approved by the Elders.

1. Records of key holder will be maintained by the church's secretary and kept on file in the church office. Keys shall be returned when they are no longer needed by the holder, and the return will be documented.
2. It is the responsibility of the deacons to monitor who is in possession of keys and to request the return of keys from persons no longer authorized to hold them. Keys are not to be loaned to unauthorized persons or kept beyond the time that they are needed. Authorized key holders may loan their key to a spouse if the spouse has signed the Key Receipt Form (see appendix).
3. Key holders are required to submit a Key Receipt Form, which includes a signed Statement of Compliance.
4. No key holder will use his or her key to access the church with a child or children not his or her own (or of whom the key holder is not a legal guardian or foster parent) at a time when there is no church related activity being held in which the child and key holder are involved. This is intended to prevent a situation where an adult key holder is alone with a child in the facility. In the rare case an exception is to be made to this provision, a written note from the child's parent or legal guardian must be submitted to the church office and approved by the elders.

Providing community for known sexual offenders

Individuals who have been adjudicated by a court or Child Protective Services findings as sexual offenders with minors and/or have admitted to past sexual abuse of children and are willing to abide by the guidelines set forth in this policy, and who “perform deeds in keeping with their repentance” (Acts 26:20) are welcome to attend alternative worship services with adults only, and attend adult educational activities. Such individuals are hereafter referred to as “known sexual offenders” or “offenders,” have admitted to or have been convicted of being sexually attracted to and victimizing children, and thereby acknowledge they should not be in the presence of children. This is to protect children from possible victimization, to keep survivors of child sex abuse from being revictimized through being forced to worship with known sex offenders, and it is to protect the repentant sex offender by placing “no obstacle in anyone’s way, so that no fault may be found with our ministry” (2 Cor. 6:3)

The famed Dr. Gene Abel says, “The first condition of treatment: the patient must keep a distance between himself (or herself) and children. *This is by far the most important treatment condition.* . . These rules have a single aim: to separate the molester patient from children and to separate him from any pictures of children that might help him maintain his sex drive toward children. . . *To separate himself from children also means he must avoid places where children congregate*”³

The minimum guidelines by which any known offender may participate in the life of the congregation are described below, and shall be incorporated into a covenant specific for the individual offender, which is to be signed by the offender prior to participation.

Depending on the circumstances and at the discretion of the CYPT, additional restrictions may be incorporated into an individual covenant. If an individual is on probation or parole, specific provisions related to contact with children, participation in counseling, and others, will be incorporated into the covenant. The individual covenant may also permit participation in additional church activities (other than those involving children) if circumstances warrant.

Minimum guidelines under which a known sexual offender may participate:

- 1. Offenders are expected to comply fully with all restrictions and requirements** placed upon them as a result of any legal actions, and provide the designated Minister on the CYPT with copies of any judgments, conditions of parole, or other documents in which restrictions on or requirements as a result of convictions or judgments are stated.

³ Abel, Gene & Nora Harlow, *The Stop Child Molestation Book: What Ordinary People Can Do In Their Everyday Lives to Save Three Million Children* (Xlibris Corporation, 2001), 254-55, emphasis added by Somerset Church of Christ.

2. Offenders are expected to participate in a professional counseling program, specifically addressing their abusive behaviors. Offenders will provide the name of the agency and mental health professional to the Minister on the CYPT at the time of request for participation. The offender may be asked to periodically sign a limited disclosure authorization for the therapist to verify to the Minister on the CYPT that the individual is in treatment.

3. The CYPT will assign supervisors to any offender participating in the life of the congregation. They will be adults who are not related to the offender. They will receive training by a professional agency that will include information on sexual offender dynamics, the long-term impact of sexual abuse on victims, and any specific conditions related to participation under the specific covenant established. If the offender is on probation or parole, the training may need to be approved by the officer of the court handling the case.

4. The CYPT will identify a small group of “covenant partners” for offenders. This small group will provide spiritual, emotional and practical support and will meet with the offender on a regular basis. The supervisors and “covenant partners” will not be the same individuals.

6. A supervisor must accompany the offender at all times when on church property.

7. At no time should the offender deliberately place him or herself in or remain in any location in or around the church facilities which would cause undue distress to others.

8. At least twice each calendar year and as otherwise requested, the offender shall meet with and report to the designated minister on the CYPT regarding status of adherence to these guidelines.

9. If the offender should decide to relocate membership (or substantially attend) another congregation, the designated pastor will seek to inform the leadership of that congregation of the conditions of these guidelines.

10. The offender will have no physical contact with minors or be allowed to contact minors via e-mail, phone, texting, or social networking sites.

Reporting Suspected Child Abuse

Anyone may report suspected child abuse. However, the PA CPSL imposes a reporting mandate, or requirement, on any individual who comes into contact with children in the course of his or her work or professional practice and has “reasonable cause to suspect” that the minor has been abused. These individuals are known as **mandated reporters**.

Church staff that should be considered mandated reporters under the CPSL are those who routinely come into contact with children, including ministers, youth directors and any other paid staff expected to come into contact with children on a regular basis.

Volunteers who are Approved Adults are not considered mandated reporters under the CPSL; however, best practices in church settings require all such persons to immediately report any suspected abuse to a salaried minister at the Somerset Church of Christ, who in turn will make the required report. **Our church follows this practice.**

The mandate (requirement) to report applies only to those children with whom the mandated reporter comes into contact through church related activities/work. The CPSL stipulates that the abused child must actually be “under the care, supervision, guidance or training of [the mandated reporter] or of an agency, institution, organization or other entity with which that person is affiliated.”

Examples of children considered by the CPSL to be **under the care or supervision of a church** would include pre-school or other students, children enrolled in child-care programs, children being “babysat” during worship services or gatherings, children participating in educational, sports, music, recreational or other church ministries such as Vacation Bible School, and youth group.

The mandate to report applies to all suspected child abuse, not just abuse that has been perpetrated by someone within the church. Possible abusers could include, for example, parents, relatives, older siblings, neighbors, coaches, schoolteachers, family friends and other children.

A mandated reporter need not make a first-hand observation of the suspected child abuse victim. Second-hand reports of abuse must be reported to the proper authorities if the mandated reporter has “reasonable cause to suspect” that child abuse has occurred.

For practical purposes, this means if a minister is informed by a church member that a child who lives next door to her is being abused by her older brother – and the child is NOT a participant in church related activities – the legal “requirement” to report is not there. If the child, however, is attending Bible school, there is a requirement to report under the “care/guidance/or supervision” clause in the CPSL.

The CPSL specifically grants legal immunity to any individual who, in good faith, makes a report of suspected child abuse. Therefore, it is our practice to report any suspected crimes of abuse, **whether the child is under our care or not.** If a child not under our care is suspected of being abused, we will not ignore those claims because we do not fall under the legal obligation to report. *We will report all suspected instances of child abuse.*

Internal guidelines for reporting suspected abuse

Anyone who is not a mandated reporter who has reasonable cause to suspect that a child/youth under their care, guidance or supervision, or a child/youth not directly under their care, guidance or supervision but involved in any church program or activity, has been abused by anyone (including but not limited to the child/youth’s family, guardians, an Approved Adult

or volunteer) shall immediately inform the Minister on the CYPT and document the suspected abuse by completing a **Suspected Child Abuse Incident Report** (see appendix).

The church is not responsible for investigating or determining whether or not abuse has occurred. The standard under the law for reporting is that “a reasonable person has cause to believe the child has been abused.” It may be necessary to ask the child or person alleging the abuse has occurred for some clarification solely in order to determine if there is cause to believe abuse may have occurred.

Detailed interviews and extensive questioning with the child and/or the alleged abuser should be conducted by legal authorities, not the church.

If a child is injured or in pain, call 911 for an ambulance.

The Minister on the CYPT will immediately make an oral report by calling The Pennsylvania ChildLine and Abuse Registry (ChildLine) at 800 932-0313 as required by law. The legal reporting obligation is met by calling ChildLine.

Following the required oral notification to ChildLine, the Somerset County Children and Youth Agency (814) 445-1661 may also be contacted by the Minister on the CYPT, as this follow-up call puts the reporter directly in touch with the persons who are familiar with the community and will be taking action on the report made to ChildLine. This may also facilitate a faster response.

Within 48 hours of the oral report to ChildLine, the Minister on the CYPT must complete a written report of the suspected abuse on **Form CY-47** (see appendix), based on the oral report and Suspected Child Abuse Incident Report of the Approved Adult or volunteer and send it to:

Somerset County Children and Youth

300 North Center Avenue

Suite 220

Somerset, PA 15501

This is a legally required report.

The volunteer or staff person who reported suspected abuse will be notified by the Minister on the CYPT of the date the written report on Form CY-47 was sent. Anyone who is not a mandated reporter may also report reasonable suspicions directly to ChildLine; however, such a report does not relieve the obligation to inform the Minister on the CYPT and complete an Incident Report.

The congregation will cooperate fully with government authorities investigating allegations of abuse. The initiative for investigating alleged abuse resides with the Department of Public Welfare (DPW) and shall not be carried out by the congregation.

As a required reporter, the minister can request certain information about a child who was the subject of a report of suspected child abuse that was made.

Information can be requested verbally or in writing from the county agency. The information that can be released to the mandated reporter is limited to:

- the final status of the child abuse report, in other words, whether it is indicated, founded or unfounded and;
- any services provided, arranged for or to be provided by the county agency to protect the child.

All allegations of child/youth abuse or serious physical neglect will be taken seriously by the minister(s), elders, and the CYPT. These allegations will be treated in strict confidence. All reporting steps taken will be documented, including a log of phone calls, personal visits, and written reports. Documentation should be kept in a secure file in the Church office.

All communications regarding the report of suspected child abuse shall attempt to protect the dignity and privacy of those persons affected by the report including the alleged child/youth victim and the person suspected of child abuse, while at the same time ensuring that persons in responsibility and law enforcement authorities remain fully informed.

Follow-up, investigation, documentation

1. Following placement of the call to report suspected abuse to ChildLine, the Minister on the CYPT will inform the parent (provided that **neither** of the custodial parents is suspected of abuse). **If a custodial parent is the alleged abuser, his or her first contact about the allegation should come from either Child & Youth Services or the police, not the church.**
2. The church should not enter into discussion with the alleged abuser after a report has been filed and during the course of the legal investigation about the details of the complaint. The alleged abuser will be removed from any position at the Somerset Church of Christ in which he or she has supervisory authority over children pending the completion of the investigation.
3. The insurance company should be contacted after the report is filed as a matter of routine practice if the alleged abuse involves a staff person. The alleged abuser will have his or her ministry restricted to exclude contact with children immediately; and may be placed on paid leave for a designated period of time during the investigation.
4. If an incident is reported that does not rise to the level of making a mandated report, the CYPT Chair will inform the child's parent(s) or guardian(s) of the concern and document the meeting.

Information

1. The extent to which information will be shared with the congregation will be determined by the minister and elders. All necessary parties will cooperate with the investigations made by the police.
2. The minister on the CYPT is to act as the official spokesperson for the congregation. Only the authorized person or persons may speak for the congregation to the news media, government agencies, attorneys, or others.

Continuing the ministry of the Church

1. Pastoral support will be offered to all parties involved, including those who have made the complaint, the alleged abuser, the families of both, and the congregation. Decisions about how this support will be given will be made by pastoral staff and the CYPT.
2. If the allegations involve pastoral staff, the ministry of the church will need to be maintained while the issue is being addressed. Decisions regarding how this will be accomplished will be made by the elders.

Violations of Child & Youth Protection Policy

Persons who admit to or plead guilty to or are convicted in a court of law of any form of physical or sexual abuse of a child/youth will be immediately, permanently, and completely disqualified by the CYPT from working with children/youth in the congregation. Persons who admit to a minister or any member of the CYPT of any type of physical or sexual abuse of a child/youth but who have not appeared in a court of law will be disqualified from working with children/youth in the congregation. Allegations of sexual or physical abuse shall disqualify any person from working with children/youth until the investigation is completed. The CYPT may temporarily or permanently disqualify any person(s) from working with children/youth, as the committee deems appropriate.

Alleged violations of the policy, other than abuse, shall be immediately reported to the CYPT Chair who will report it to the elders, if deemed appropriate. The CYPT will investigate the alleged violations of the policy. If a person(s) is found to be in violation of the policy, the CYPT will determine what disqualification or disciplinary action, if any, is necessary.

Training and Education

Policy on Education and Training

This policy will be available to the entire congregation. Copies will be kept in each nursery, the Sunday School cupboard, and in the office and available upon request.

In order to be an Approved Adult, a volunteer or staff member must participate in an initial training that covers recognizing and responding to child abuse, mandated reporting requirements, and church guidelines and practices. PA Act 126 training meets all requirements of this training. A refresher course for all approved adults will be held at least every two years. Volunteers or staff who cannot attend sessions in person will be required to review a tape (video, audio) or a power point of the training prior to serving with youth. Adults will not be approved to take care of children until after they have completed the required training.

All Approved Adults and staff will receive a full copy of the Child & Youth Protection Policy, sign a Statement of Compliance and sign a Child Protection Covenant.

Procedures for Education and Training

Staff and Volunteers

1. Training will be offered at least once a year. It will be considered a mandatory part of volunteer training and employee orientation. The initial training of for each new staff person and volunteer will be at least 2.5 hours.

2. Once an individual has participated in the initial training, a refresher training of at least one hour will be required every two years to ensure that the individual's knowledge is current and accurate.

3. The church's secretary will maintain a record of who has received training and the dates.

4. Training will include the use of professional training materials on child abuse, including specific information about:

- child sexual abuse, behavioral signs, and how to respond to a disclosure
- the grooming process sexual offenders often use to engage children
- a review of policies and procedures that are specific to Somerset Church of Christ and pertinent to the work in which the employee or volunteer will be involved
- instruction in the use and completion of the various forms.

Parents and other Members

They are encouraged to attend the annual workshop on child abuse hosted at the Somerset Church of Christ. It is a free three hour workshop and incorporates the latest research on the topic of child abuse.

APPLICATION TO BECOME AN APPROVED ADULT

This application is a mandatory part of a process to assist the congregation in providing a safe, nurturing Christian environment for our children/youth. Persons responsible for the supervision and care of our children/youth are in a special position of trust and confidence. Therefore, all adults (18 years of age or older) seeking to work with the children/youth of Somerset Church of Christ, Somerset, PA must complete this application.

PERSONAL INFORMATION

Please attach photographic identification, e.g., copy of driver's license.

(1) Name _____ (2) Date of Application _____

(3) Address and Mailing

Address _____

(4) Telephone (Home) _____ (5) (Work) _____ (6) (Cell) _____

(7) E-mail Address _____

(8) Are you 18 years of age or older? ☐ Yes ☐ No

CHURCH OR CHILD-RELATED WORK

(9) List your talents, training, education, etc., that might help enrich the lives of our children/youth.

Describe the type of work you prefer.

(10) Name and cities of all churches you have attended on a regular basis at any time during the last five years. For each church, indicate with (*) whether you were a member.

(11) Describe any church work you have done with children/youth during the last five years. Include the church's name, city, and year(s) of participation.

(12) Describe any non-church related work you have done with children/youth during the last five years. Include the organization's name, city, and year(s) of participation.

Before answering questions 15 through 17 on this application, please read the Child & Youth Protection Policy of Somerset Church of Christ, Somerset, PA and the page attached to this application on which appear definitions of child abuse and child sexual abuse and exploitation. In the questions below, the words "*abuse*," "*abusing a child*" and "*child abuse*" are intended to include the conduct described in the definitions.

(13) Have you ever abused, been accused of abusing, or been investigated for abusing a child/youth (a person less than 18 years of age)? ☐ Yes ☐ No

If yes, please explain.

(14) Have you ever been arrested for, convicted of, or plead guilty to a criminal offense against a person? ☐ Yes ☐ No

If yes, please explain

(15) Have you ever been involved in a child abuse investigation as a witness or as an alleged victim?

☐ Yes ☐ No

If yes, please explain.

PERSONAL REFERENCES

Give the name, address, and phone number of two persons, not relatives, who have known you for at least five years.

(1) _____

(2) _____

I agree that the information contained in this application is correct to the best of my knowledge.

Applicant's Signature _____ Date _____

APPLICANT'S PERMISSION FOR THE DISCLOSURE OF INFORMATION ABOUT THE APPLICANT AND APPLICANT'S RELEASE OF ALL CLAIMS AGAINST PERSONS OR ENTITIES THAT DISCLOSE INFORMATION OR GIVE OPINIONS ABOUT THE APPLICANT

I understand and agree that the congregation may contact the churches and references identified above and others who may be identified by those listed above. I authorize these references or churches or others to give you any information (including opinions) that they may have regarding my character and fitness for work with children/youth. I also understand and agree that law enforcement authorities or any other person or entity with access to records of criminal arrests or convictions may be contacted during the consideration of this application. I authorize these law enforcement authorities or any other person or entity to provide information regarding criminal arrests or convictions. In consideration of the receipt and evaluation of this application by the congregation, I hereby release the congregation and any individual, church, youth organization, employer, reference, or any other person or entity, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of any person's or entity's disclosure of information about me or the expression of an opinion about me. I further state that I have carefully read the foregoing release and understand its content. I am signing this release freely and voluntarily.

Applicant's Signature _____ Date _____

I acknowledge that the above named applicant has appeared before..

Reviewer: _____ Date: _____

CHILD PROTECTION COVENANT

I accept the responsibility to nurture the Christian faith and well being of the children and youth of Somerset Church of Christ and to care for them as Christ cares for me.

“I ...will tend the flock of God that is in my charge... willingly, as God would have me do it...” --I Peter 5:2

I have read, understand, and agree to abide by the Child & Youth Protection Policy of Somerset Church of Christ as summarized.

Signature

Date

Signature of Witness

Date

Dear _____,

I am pleased to inform you that you have successfully completed the steps to become an Approved Adult for Somerset Church of Christ. As an Approved Adult, you will be able to fully participate in the life-changing ministries that Somerset Church of Christ provides to our children and youth.

We believe that our Child & Youth Protection Policy provides an essential framework and necessary information to help ensure that our children will be nurtured in a safe, protective, and caring environment.

If you have any questions about the guidelines and forms included in the policy, please feel free to discuss them with me, Jimmy Hinton, minister, or another member of our Child & Youth Protection Team (Mary Ann Riggs, or Jen Riggs). Thank you for volunteering to serve the children and youth of Somerset Church of Christ!

In Christ's service,

Jimmy Hinton
Minister

Pennsylvania Child Abuse History Clearance Instructions

1. Type or print clearly and neatly in ink Section I only.
2. Address must be Applicant's current home address.
3. One block must be checked for Purpose for Clearance. **Check the Volunteer Block. A copy of your Criminal Record Check results obtained within the past year must be attached. Do not send original Criminal Record results.** If you are not a Pennsylvania resident, you must also attach a copy of your FBI results obtained within the past year. This block should not be checked for Clearance results will be mailed to you within 14 days from the date that the clearance is received in our office. There will be no replacements after 90 days. Failure to comply with the above instructions will cause considerable delay.
4. List all previous addresses since 1975. All information must be completed in full. (The form asks for all previous names, addresses, and household members since 1975). This information must be provided to the best of your knowledge and belief. If necessary, attach additional pages.
5. Sign the application.
6. Complete the "Consent/Release of Information Authorization Form for the Pennsylvania Child Abuse History Clearance" and attach.
7. Double check that you have each of the following forms and give them to Jimmy Hinton, Minister, or to the Secretary.
 1. Criminal Record Check
 2. Child Abuse History Clearance Form
 3. Consent/Release of Information Authorization Form for the Pennsylvania Child Abuse History Clearance

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

COMPLETE SECTION 1 ONLY. Print clearly in ink. Enclose \$10.00 money order ONLY, payable to DEPARTMENT OF PUBLIC WELFARE. **DO NOT send cash or personal check.**
Send to CHILDLINE AND ABUSE REGISTRY, DEPARTMENT OF PUBLIC WELFARE, P.O. BOX 8170
HARRISBURG, PA 17105-8170

APPLICATIONS THAT ARE INCOMPLETE, ILLEGIBLE OR RECEIVED WITHOUT FEE WILL BE RETURNED UNPROCESSED. IF YOU HAVE QUESTIONS CALL 717-783-6211, OR (TOLL FREE) 1-877-371-5422.

CHILDLINE USE ONLY

DATE RECEIVED BY CHILDLINE

SECTION I

APPLICANT IDENTIFICATION

IN THIS SPACE PRINT APPLICANT'S FULL NAME AND ADDRESS (DO NOT USE INITIALS)

NAME

STREET

CITY, STATE
ZIP CODE

SOCIAL SECURITY NUMBER

AGE

DATE OF BIRTH

DAYTIME PHONE NO.

SEX

☐

M

☐

F

COUNTY YOU LIVE IN

Disclosure of your Social Security number is voluntary. It is sought under 23 Pa.C.S. §§ 6336(a)(1) (relating to Information in statewide central register), 6344 (relating to Information relating to prospective child care personnel), 6344.1 (relating to Information relating to family day-care home residents), and 6344.2 (relating to Information relating to other persons having contact with children). The department will use your Social Security number to search the statewide central register to determine whether you are listed as the perpetrator in an indicated or founded report of child abuse.

PURPOSE OF CLEARANCE (Check ONE block ONLY)

- ☐ Child Care Services Employee
- ☐ Foster Care ☐ Adoption ☐ School Employee
- ☐ Employment with a significant likelihood of regular contact with children
- ☐ Volunteers - A copy of your **PROCESSED** "Request for Criminal Record" (Form SP4-164) must be attached. Out-of-state residents must also attach a copy of their **PROCESSED** FBI clearance (Form FD-258).
- ☐ DPW Employment & Training Program Participant
(signature required below)

SIGNATURE OF OIM/CAO REPRESENTATIVE

OIM/CAO PHONE NUMBER

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

1. (LAST, FIRST, MIDDLE)

2. (LAST, FIRST, MIDDLE)

3. (LAST, FIRST, MIDDLE)

4. (LAST, FIRST, MIDDLE)

5. (LAST, FIRST, MIDDLE)

PREVIOUS ADDRESSES SINCE 1975 (Attach additional pages if necessary)

1.

2.

3.

4.

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

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

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

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

APPLICANT'S SIGNATURE

DATE

DO NOT WRITE IN THIS SECTION - CHILDLINE USE ONLY

SECTION II		RESULTS OF HISTORY CHECK	
<input type="checkbox"/> APPLICANT IS NOT LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE.		<input type="checkbox"/> APPLICANT IS LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE (SEE BELOW).	
STATUS OF REPORT	DATE OF INCIDENT	STATUS OF REPORT	DATE OF INCIDENT
1.	-	3.	-
2.	-	4.	-
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 25%; text-align: center;"> _____ <small>VERIFIER</small> </div> <div style="width: 25%; text-align: center;"> _____ <small>DATE</small> </div> <div style="width: 25%; text-align: center;"> _____ <small>VERIFIER'S SUPERVISOR</small> </div> <div style="width: 25%; text-align: center;"> _____ <small>DATE</small> </div> </div>			

SECTION III		VOLUNTARY CERTIFICATION FOR CHILD CARE SERVICES	
<p>_____ has requested a certification which includes a clearance of his/her name against the child abuse, school employee, and criminal history reports.</p> <p>The results of the child abuse and school employee report clearances are listed in Section II on the reverse side. The results of the criminal history reports are listed below. Out-of-state residents must have criminal history clearance from both the Pennsylvania State Police and the FBI. The voluntary certification may be obtained every two years.</p> <p>It is the responsibility of parents and guardians to review this information to determine the suitability of the applicant as a substitute caregiver.</p>			
PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE			
<input type="checkbox"/> Applicant is named as the perpetrator of a founded child abuse or school employee report which occurred in the last five years. <input type="checkbox"/> Applicant is named as the perpetrator of a founded child abuse or school employee report which occurred over five years ago. <input type="checkbox"/> Applicant is named as the perpetrator of an indicated child abuse or school employee report. <input type="checkbox"/> Applicant is not named as the perpetrator of any child abuse or school employee report contained in the Statewide Central Register.			
PENNSYLVANIA STATE POLICE CLEARANCE			
<input type="checkbox"/> Record exists and contains convictions which prohibit hire in a child care position. Report attached. <input type="checkbox"/> Record exists, but convictions do not prohibit hire in a child care position. Report attached. <input type="checkbox"/> Record exists, but no convictions are shown. This does not prohibit hire in a child care position. Report attached. <input type="checkbox"/> No record exists. Report attached.			
FBI CLEARANCE			
<input type="checkbox"/> Record exists and contains convictions which prohibit hire in a child care position. Report attached. <input type="checkbox"/> Record exists, but convictions do not prohibit hire in a child care position. Report attached. <input type="checkbox"/> Record exists, but no convictions are shown. This may not prohibit hire in a child care position. Report attached. <input type="checkbox"/> No record exists. Report attached. <input type="checkbox"/> No FBI clearance required.			
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 25%; text-align: center;"> _____ <small>VERIFIER</small> </div> <div style="width: 25%; text-align: center;"> _____ <small>DATE</small> </div> <div style="width: 25%; text-align: center;"> _____ <small>VERIFIER'S SUPERVISOR</small> </div> <div style="width: 25%; text-align: center;"> _____ <small>DATE</small> </div> </div>			

**DIRECTIONS TO COMPLETE THE
PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE APPLICATION:**

1. Applicants are to complete Section I only.
2. Type or print clearly and neatly in ink only.
3. The space for the applicant's name must be the applicant's full legal name. An initial is not acceptable for a first name. The address listed must be applicant's current home address. This is also where the results of the clearance will be mailed.
4. The applicant's Social Security number is voluntary. If filling in the Social Security number please fill in the entire Social Security number.
5. Age – Fill in the applicant's current age.
6. Date of Birth – Fill in the applicant's date of birth (Example: 01/22/1990).
7. Daytime Phone Number – Fill in the number for where the applicant can be reached in the event that there are questions about the information on the application.
8. Sex – Check the appropriate box for male or female.
9. County You Live In – Fill in the name of the county where you reside (this should be the county for the address that the applicant filled in the space on the left of this section).
10. **Purpose of Clearance** – Do not check more than one block:
 - a. Check the Child Care box if planning to work in a day care or child care setting.
 - b. Check the Foster Care box if applying as a prospective foster parent.
 - c. Check the School Employee box if seeking to have involvement within a school (public, private, vocational, or technical) for employment or volunteer purposes OR check this box if a child abuse clearance is needed due to enrollment in an educational program such as a nursing school or technical program.
 - d. Check the Adoption Block if in the process or planning to adopt a child.
 - e. Check Employment With A Significant Likelihood of Regular Contact With Children if NONE of the other options relate to why a child abuse clearance is needed.
 - f. Check the Volunteers box if performing a service (paid or unpaid) for organizations such as Big Brothers/Big Sisters, Boy Scouts, Little League, or churches. As noted on the form, if the Volunteer box is checked, the applicant must also attached A COPY of the RESULTS from their PA State Police Criminal History Record Check. Do not send original criminal record results because the original cannot be returned. If the applicant is not a current Pennsylvania resident, the applicant must also attach a copy of their FBI Criminal History results obtained within the past year.
 - g. Check the DPW Employment & Training Program Participant box if the applicant is participating in a Department of Public Welfare employment and training program through a county assistance office, or CAO, or the Office of Income Maintenance, OIM. The signature **AND** phone number of the CAO or OIM representative is required.
11. Previous Names Used Since 1975 - The applicant must list any and all full legal names that they have ever had since 1975. This includes maiden names, aliases and also known as (aka) names.
12. Previous Addresses Since 1975 - List all addresses where the applicant has resided since 1975. The applicant can attach an additional sheet of paper with all of the addresses listed if necessary. If the applicant cannot remember the exact mailing addresses since 1975, filling in as much information as possible about the location will be acceptable.
13. Household Members - Include anyone that the applicant lived with since 1975 (parents, guardians, siblings, children, spouse (ex), paramour, friends, etc.). If the applicant was under the age of 18 in 1975 this section must include other household members who lived with the applicant or with whom the applicant lived. Please note the household member's relationship to the applicant, their age (to the best of your knowledge) and their sex. Applications where this section is left blank will be rejected and returned to the applicant.
14. Applications must be signed and dated. Applications that are not signed and dated will be rejected and returned to the applicant.
15. Enclose a \$10.00 money order for each application. No cash or personal checks will be accepted. Agency or business checks are acceptable.
16. Do not send any postage paid return envelopes for us to return your results. Results are issued through an automated system generated mailing process.

Note: Clearance results will be mailed to you within 14 days from the date that the clearance is received in our office. Failure to comply with the above instructions will cause considerable delay in processing the results of an applicant's child abuse clearance.

**PENNSYLVANIA STATE POLICE
REQUEST FOR CRIMINAL RECORD CHECK**

This form is to be completed in ink by the requester – (information will be mailed to the requester only). If this form is not legible or not properly completed, it will be returned unprocessed to the requester. *A response may take four weeks or longer.*
Warning: A person commits a misdemeanor of the third degree if he/she makes a written false statement, which he/she does not believe to be true.

TRY OUR WEBSITE FOR A QUICKER RESPONSE
<https://epatch.state.pa.us>

NAME/ REQUESTER	
ADDRESS	
CITY/STATE/ ZIP CODE	

CONTACT TELEPHONE NUMBER (INCLUDING AREA CODE)

			-				-				
--	--	--	---	--	--	--	---	--	--	--	--

NAME/SUBJECT OF RECORD CHECK (FIRST)	(MIDDLE)	(LAST)	
MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	SEX
			RACE

The Pennsylvania State Police response will be based on the comparison of the data provided by the requester against the information contained in the files of the Pennsylvania State Police Central Repository only

REASON FOR REQUEST: All requests \$10.00

*****MAKE ALL MONEY ORDERS PAYABLE TO: COMMONWEALTH OF PENNSYLVANIA*****

◀◀◀◀◀CHECK BOX THAT MOST APPLIES TO THE PURPOSE OF THIS REQUEST▶▶▶▶▶

☐ **INTERNATIONAL ADOPTION - INTERNATIONAL ADOPTION MUST BE NOTARIZED.**

- | | | |
|---|---|--|
| <input type="checkbox"/> ADOPTION (DOMESTIC) | <input type="checkbox"/> EMPLOYMENT/SCREENING | <input type="checkbox"/> PASSPORT |
| <input type="checkbox"/> ATTORNEY | <input type="checkbox"/> FOSTER CARE | <input type="checkbox"/> PRIVATE INVESTIGATIONS |
| <input type="checkbox"/> BANKING | <input type="checkbox"/> HEALTHCARE | <input type="checkbox"/> SOCIAL SERVICES |
| <input type="checkbox"/> BAR ASSOCIATION | <input type="checkbox"/> HOUSING | <input type="checkbox"/> TENANT CHECK |
| <input type="checkbox"/> CHURCH | <input type="checkbox"/> INSURANCE LICENSE | <input type="checkbox"/> VISA |
| <input type="checkbox"/> CHILD CARE | <input type="checkbox"/> MENTAL HEALTH | <input type="checkbox"/> VOLUNTEER AMBULANCE/FIREFIGHTER |
| <input type="checkbox"/> EDUCATION | <input type="checkbox"/> NURSE AID TRAINING | <input type="checkbox"/> VOLUNTEER |
| <input type="checkbox"/> ELDER CARE | <input type="checkbox"/> OTHER _____ | |
| <input type="checkbox"/> EMERGENCY MANAGEMENT | | |

☐ **ACCESS & REVIEW** - (NOT FOR EMPLOYMENT PURPOSES. MUST BE MAILED INTO THE CENTRAL REPOSITORY.)

AVAILABLE ONLY TO SUBJECT OF RECORD OR LEGAL REPRESENTATIVE WITH LEGAL AFFIDAVIT ATTACHED FOR THE PURPOSE OF REVIEWING YOUR CRIMINAL HISTORY.

**FOR CENTRAL REPOSITORY USE ONLY
CONTROL NUMBER**

AFTER COMPLETION MAIL TO:

**PENNSYLVANIA STATE POLICE
CENTRAL REPOSITORY – 164
1800 ELMERTON AVENUE
HARRISBURG, PA 17110-9758**

Local Number 717-425-5546

1-888-QUERYPA (1-888-783-7972)

**DO NOT SEND CASH OR PERSONAL
CHECK**

CHECK ONE BLOCK

☐ INDIVIDUAL/NONCRIMINAL JUSTICE AGENCY – ENCLOSE A CERTIFIED CHECK/MONEY ORDER IN THE AMOUNT OF \$10.00, PAYABLE TO:

**“COMMONWEALTH OF PENNSYLVANIA”
THE FEE IS NONREFUNDABLE**

☐ FEE EXEMPT-NONCRIMINAL JUSTICE AGENCY – NO FEE

Key Receipt Form

I understand that, as a person with a key(s) to Somerset Church of Christ, I am responsible for maintaining the safety of the Church environment while any property and/or facility of Somerset Church of Christ is unlocked by the key(s) I hold.

I agree to be entirely responsible for the security of the key(s) and to:

- Not lend the key(s) to anyone, unless authorized by the Leadership Team and the team member signs this form;
- Not tag or otherwise identify the key(s) as providing access to any property and/or facility of Somerset Church of Christ.
- I understand that I am not to be alone in any room or secluded area on Somerset Church of Christ's property at any time with a child or youth that is not my own or a relative without parental permission.
- Return the key(s) when I no longer have the responsibility that created a need to have the key(s) or when an authorized representative of Somerset Church of Christ requests such return.

- If any property and/or facility of Somerset Church of Christ is unlocked by the key that I hold,

I will be the last one out of the building and will check that ALL doors are locked, **OR**

I will notify other church representatives who are still in the building that I am leaving.

I understand that failure to comply with any of the provisions set forth in the Child & Youth Protection Policy for Somerset Church of Christ or this Key Receipt Form may result in the loss of my privilege to be a key holder.

Name (please print): _____

Home Phone: () _____ Daytime Phone, if different: () _____

Signature: _____ Date: _____

An additional holder of a single key assigned, which might be shared for reasons **only after approval by the Leadership Team**, must sign below and adhere to the same direction as outlined above. It is understood that failure to comply with any of the provisions set forth in the Child & Youth Protection Policy for Somerset Church of Christ or this Key Receipt Form may result in the loss of my privilege to be a key holder.

Name (please print): _____

Home Phone: () _____ Daytime Phone, if different: () _____

Signature: _____ Date: _____

Date Key Returned: _____

Signature of Key holder: _____

Signature of Authorized Representative of Somerset Church of Christ:

Somerset Church of Christ

310 S. Kimberly Ave.
Somerset, PA 15501

(814)-445-5569

jimmy@somersetchurch.comcastbiz.net

Child Protection

Subject: Medical Release Form

Date implemented: June 2014

Approved by: Jimmy Hinton, Minister

Student's Name: _____ Gender _____ Age/D.O.B. _____

Address: _____ Phone: _____

Parents'/Guardians' Names: _____

Address (if different from child's): _____

Insurance Company _____ Policy #: _____
Group ID #: _____

1. Is your child allergic to:
_____ bee sting _____ pollens _____ other drugs _____
_____ hay, straw _____ penicillin _____ food _____
_____ other _____

2. Does your child have any life-threatening allergies? _____ Yes _____ No
If yes, to what? _____

3. Is your child bringing any medication with him/her? _____ Yes _____ No
If yes, please list and state dosage:

Please Note: Medication should be in its original prescription bottle/package, which should have administration instructions and the child's name clearly indicated.

4. Does your child have any physical, emotional, mental or behavioral concerns or limitations that our staff should be aware of? ____ Yes ____ No If yes, please explain:

5. Has your child ever had:

____ seizures ____ asthma ____ diabetes
____ homesickness ____ heart disease ____ other _____

6. Date of last tetanus shot: _____

Parents will be notified immediately of any medical emergency.

In the case of a medical emergency, in which parent/guardian is not immediately available, the medical personnel require a signed parental release before treatment. I hereby give my permission to a representative of Somerset Church of Christ to secure proper medical treatment and/or to administer medication as identified above as needed (see # 3). I verify that the above information is correct to the best of my knowledge.

Signature of Parent/Guardian: _____ Date: _____

Emergency Phone:

Home: _____

Work: _____

Cell: _____

Person to contact if parent/guardian cannot be reached:

Name: _____

Relationship: _____

Phone: _____

NURSERY SIGN IN SHEET

Date _____

[illegible]

NURSERY SIGN IN SHEET

Date _____

[illegible]

Somerset Church of Christ

310 S. Kimberly Ave.
Somerset, PA 15501
(814)-445-5569

jimmy@somersetchurch.comcastbiz.net

Subject: Travel and Transportation Form
Date implemented: June 2014

Approved by: Jimmy Hinton, Minister

In ordinary circumstances, students are to be transported to and from youth activities by adult advisors.

According to consent of the Elders, students can either drive directly to activities without other student passengers or meet at Somerset Church of Christ and travel as a group. A student driving direct and taking student passengers must have specific approval of the advisor for each occasion and written approval by all parents involved for such car-pooling so that the responsibility is fully shared by home and church.

Note: This form does not include transportation to and from the church, which is the responsibility of you and /or your teen(s) to make arrangements as you see fit.

Somerset Church of Christ

310 S. Kimberly Ave.
Somerset, PA 15501
(814)-445-5569

jimmy@somersetchurch.comcastbiz.net

Subject: Travel and Transportation Form
Date implemented: June 2014

Approved by: Jimmy Hinton, Minister

In ordinary circumstances, students are to be transported to and from youth activities by adult advisors.

According to consent of the Elders for a particular event, students can either drive directly to activities without other student passengers or meet at Somerset Church of Christ and travel as a group. A student driving direct and taking student passengers must have specific approval of the advisor for each occasion and written approval by all parents involved for such car-pooling so that the responsibility is fully shared by home and church.

Note: This form does not include transportation to and from the church, which is the responsibility of you and /or your teen(s) to make arrangements as you see fit.

Somerset Church of Christ

310 S. Kimberly Ave.

Somerset, PA 15501

(814)-445-5569

jimmy@somersetchurch.comcastbiz.net

Child Protection

Subject: Parental/Guardian Consent Statement Form

-Form to be completed activities held off the Somerset Church of Christ premises as well as activities within the Somerset Church of Christ facility. Overnight activities will require a specific form for each activity.

Date implemented: June 2014

Approved by: Jimmy Hinton, Minister

I hereby consent for my child(ren), _____, to
Child/Youth Name(s)

participate in the following event: all youth group activities through Somerset Church of Christ

Date: 06/01/14-06/01/15 _____ Location: Somerset Church of Christ and other
locations _____

It is understood that every precaution will be taken for the safety and well-being of my child(ren). In the event of accident or sickness, the child will be provided with appropriate medical care and every effort will be made to contact the parent/guardian as soon as possible. Somerset Church of Christ, its staff, and its volunteers are hereby released from any liability.

Signature: _____ Date: _____

Printed name: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Address: _____

Emergency Contact (if the above named can not be reached):

Name: _____ Phone: _____

Relationship to Child(ren): _____

Any other medical concerns?

Are there any food allergies? _____ yes _____ no

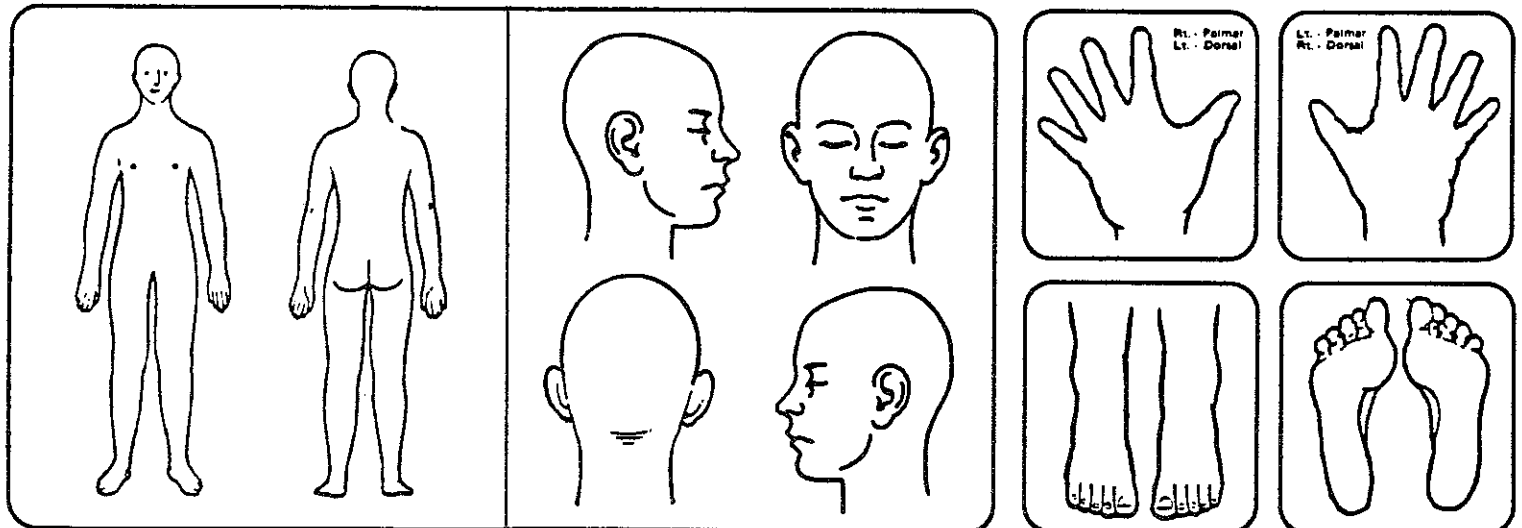
If yes, please list: _____

REPORT OF SUSPECTED CHILD ABUSE

(CHILD PROTECTIVE SERVICE LAW - TITLE 23 PA CSA CHAPTER 63)

PLEASE REFER TO INSTRUCTIONS ON REVERSE SIDE. EXCEPT FOR SIGNATURE, PLEASE PRINT OR TYPE

1. NAME OF CHILD (Last, First, Initial)		SOC. SEC. NO.	BIRTHDATE	SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (Street, City, State & Zip Code)			COUNTY	
1A. PRESENT LOCATION IF DIFFERENT THAN ABOVE			COUNTY	
2. BIOLOGICAL/ADOPTIVE MOTHER (Last, First, Initial)		SOC. SEC. NO.	BIRTHDATE	TELEPHONE NO.
ADDRESS (Street, City, State & Zip Code)			COUNTY	
3. BIOLOGICAL/ADOPTIVE FATHER (Last, First, Initial)		SOC. SEC. NO.	BIRTHDATE	TELEPHONE NO.
ADDRESS (Street, City, State & Zip Code)			COUNTY	
4. OTHER PERSON RESPONSIBLE FOR CHILD		SOC. SEC. NO.	BIRTHDATE	RELATIONSHIP TO CHILD
ADDRESS (Street, City, State & Zip Code)		COUNTY	SEX <input type="checkbox"/> M <input type="checkbox"/> F	
5. ALLEGED PERPETRATOR (Last, First, Initial)		SOC. SEC. NO.	BIRTHDATE	RELATIONSHIP TO CHILD
ADDRESS (Street, City, State & Zip Code)		COUNTY	SEX <input type="checkbox"/> M <input type="checkbox"/> F	
6. FAMILY HOUSEHOLD COMPOSITION (Excluding Above Names)				
NAME (Last, First, Initial)	RELATIONSHIP TO CHILD	NAME (Last, First, Initial)	RELATIONSHIP TO CHILD	
A.		D.		
B.		E.		
C.		F.		
DESCRIBE INJURIES/CONDITION AND WHY YOU SUSPECT ABUSE/NEGLECT. INCLUDE EVIDENCE OF PRIOR ABUSE TO THIS CHILD, SIBLING OR PERPETRATOR. (PLEASE REFER TO OPPOSITE SIDE FOR ADDITIONAL INFORMATION). PLEASE NOTE EXACT LOCATION OF THE INJURY(S) ON MODEL BELOW.				
			COUNTY WHERE ABUSE OCCURRED	DATE OF INCIDENT



7. ACTIONS TAKEN OR ABOUT TO BE TAKEN BY REPORTER, COUNTY AGENCY, LAW ENFORCEMENT, SCHOOL OFFICIAL, OR OTHERS.			
<input type="checkbox"/> NOTIFICATION OF CORONER	<input type="checkbox"/> X-RAYS	<input type="checkbox"/> PHOTO-GRAPHS	<input type="checkbox"/> HOSPITAL-IZATION
<input type="checkbox"/> POLICE NOTIFIED	<input type="checkbox"/> MEDICAL EXAMINATION	<input type="checkbox"/> EMERGENCY CUSTODY TAKEN	<input type="checkbox"/> OTHER (Specify) _____
8. RISK FACTORS, CHILD:			
A. DESCRIBE ANY PHYSICAL, MENTAL OR BEHAVIORAL FACTORS THAT MAY PLACE THE CHILD AT RISK:			<input type="checkbox"/> UNKNOWN
B. DOES THE CHILD APPEAR TO NEED IMMEDIATE MEDICAL ATTENTION?			IF YES, PLEASE EXPLAIN:
<input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES			
C. LEVEL OF PAIN CHILD EXHIBITS		PLEASE DESCRIBE:	
<input type="checkbox"/> MILD <input type="checkbox"/> MODERATE <input type="checkbox"/> SEVERE			
D. DOES THE CHILD APPEAR TO BE FEARFUL, SUICIDAL OR WITHDRAWN? IF YES, PLEASE EXPLAIN:			
<input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES			
9. RISK FACTORS, FAMILY:			
A. DESCRIBE ANY CARETAKER/PERPETRATOR CHARACTERISTICS THAT PLACE THE CHILD AT RISK:			<input type="checkbox"/> UNKNOWN
B. DESCRIBE THE EXTENT OF PERPETRATOR(S) ACCESS TO CHILD:			<input type="checkbox"/> UNKNOWN
C. IS THERE ANY SUBSTANCE ABUSE IN THE HOUSEHOLD?		IF YES, PLEASE EXPLAIN:	
<input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES			
D. DOES THE CARETAKER/PERPETRATOR HAVE A HISTORY OF VIOLENCE OR SEVERE EMOTIONAL PROBLEMS? IF YES, PLEASE EXPLAIN:			<input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES
E. WHAT IS THE ENVIRONMENTAL (HEALTH AND SAFETY) CONDITION OF THE HOME?			<input type="checkbox"/> UNKNOWN
F. WILL CHILD BE AT RISK DUE TO COUNTY AGENCY INVOLVEMENT?			IF YES, PLEASE EXPLAIN:
<input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES			
G. ARE THERE WEAPONS IN THE HOME?		IF YES, PLEASE EXPLAIN:	
<input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES			

INSTRUCTIONS TO MANDATED PERSONS: Any persons who, in the course of their employment, occupation, or practice of their profession come into contact with children shall report or cause a report to be made to ChildLine (800-932-0313) when they have reasonable cause to suspect, on the basis of their medical, professional or other training and experience, that a child coming before them in their professional or official capacity is a victim of child abuse. Within 48 hours after making the oral report, send one copy of this report to the county children and youth agency.

NOTE: If the child has been taken into custody, you must also immediately contact the county children and youth agency where the abuse occurred. Except for confidential communications made to an ordained member of the clergy, the privileged communication between any professional person required to report and the patient or client of that person shall not apply to situations involving child abuse and shall not constitute grounds for failure to report suspected abuse.

REPORTING SOURCE			
SIGNATURE	TITLE OR RELATIONSHIP TO CHILD	FACILITY OR ORGANIZATION	
ADDRESS	TELEPHONE NUMBER	DATE OF REPORT	

APPENDIX – Listing of Forms

APPROVED ADULT – Application

APPROVED ADULT – Child Protection Covenant

APPROVED ADULT – Letter of Approval

*CLEARANCES – Consent/Release of Information Authorization Form for the PA
Child Abuse History Clearance

CLEARANCES – Request for PA State Police Criminal Record Check and PA Child
Abuse History Clearance (to Somerset Church of Christ)

CLEARANCES – Request for Criminal Record Check

CLEARANCES – PA Child Abuse History Clearance Instructions

CLEARANCES – PA Child Abuse History Clearance Form

KEY Receipt Form

MEDICAL RELEASE FORM – youth (& children)

NURSERY Sign in Sheet –

PARENTAL/Guardian Consent Statement Form – youth

REPORT of Suspected Child Abuse – Internal Church Use

REPORT of Suspected Child Abuse – State Form CY-47