

VERIFICATION

This verifies that	has par	ticipated in training for
(Name of Participant)		
children and youth protection, which was held at		on .
	(Site)	(Date)
This training was in compliance with A Statement of Policy for the Pro	stection of Children and Youth.	
Signature of Participant	Date	
Signature of Trainer	Date	

Please Note: This training is recognized for Catechist and Youth Ministry Certification as 1 clock hour in Area "B" and 2 in Area "C".

Please keep a copy of this form for your records. Return original to your parish, school, or institution for your employee/volunteer personnel file. Thank you!