

# 2006

DIOCESE OF COVINGTON  
Policies and Procedures for Addressing Sexual Misconduct  
**Acceptance Form**

I have received a copy of the Diocese of Covington's Policies and Procedures for Addressing Sexual Misconduct. I understand and agree to abide by such Policies and Procedures.

Name (please print)

\_\_\_\_\_

Position \_\_\_\_\_

Parish/School/Institution/Agency \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

*If you are paid through the Diocese of Covington Payroll System, please provide your FILE number (upper left hand corner of your paycheck stub). Please copy this acceptance form, complete it and return it with the original signature to the parish, school, institution or agency where you are employed or volunteer.*

\_\_\_\_\_ I have signed the Youth Leader Request Form and agree to undergo a criminal background check through the Administrative Office of the Court (OAC).

\_\_\_\_\_ I have signed the Kentucky Request For Conviction Records / Non Public School.

\_\_\_\_\_ I have attended or \_\_\_\_\_ I will attend Virtus training through the Diocese and keep my Virtus registration up to date.