

DIOCESE OF PATERSON

Training Report for Catholic School Students: *Virtus* or *RCL Benziger*

20 ____ - 20 ____ School Year

Name of School & City: _____

Check the Program your School Used: *Virtus* *RCL Benziger*

Total # of Students Trained: _____

Total # of Students Who Opted Out: + _____

Total # of Students Absent: + _____

This does not apply to the RCL Benziger Course

Total # of Students in School: * _____

Do not include pre K Classes

**** Should equal the total of the 3 numbers above.***

Submitted by: _____ Date: _____

Please Print

Please return completed form to either: (please no fax)

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