

CATHOLIC DIOCESE OF ROCKFORD
CODE OF PASTORAL CONDUCT
VOLUNTEER ACKNOWLEDGEMENT

I, _____, in my capacity as a volunteer, acknowledge that I have received the Catholic Diocese of Rockford Code of Pastoral Conduct for Priests, Deacons, Pastoral Ministers, Employees, and Volunteers of the Catholic Diocese of Rockford, and agree that I have read and will abide by the provisions of this Code of Pastoral Conduct as a volunteer of the Diocese.

Volunteer's Printed Name

Volunteer's Signature

Date

ST. PATRICK CATHOLIC CHURCH

Parish/Entity

MCHENRY

City

NORMS FOR PROHIBITION OF SEXUAL ABUSE AND MISCONDUCT

VOLUNTEER RECEIPT ACKNOWLEDGMENT

I, _____, acknowledge that I have received the
(Name of Volunteer)

Diocese of Rockford's Norms for the Prohibition of Sexual Abuse of Minors and Sexual Misconduct with Adults of the Diocese of Rockford. I agree that I will read and abide by the provisions of these norms as a volunteer of the Diocese.

Also, I acknowledge that the Norms for the Prohibition of Sexual Abuse of Minors and Sexual Misconduct with Adults that I have received this date replace all prior policies or regulations that I may have received from the Diocese. I agree that those former policies or regulations are no longer in force of effect.

Signature Date: _____

Volunteer Name: _____

Institution: ST. PATRICK CATHOLIC CHURCH

City: MCHENRY

WITNESS

FOR OFFICE USE:
Parish/School/Diocesan facility to maintain this form at the location.

GUIDELINES FOR YOUTH AND THOSE WORKING WITH YOUTH
RECEIPT ACKNOWLEDGMENT

I, _____ acknowledge that I have received the
(Name)

Diocese of Rockford's Guidelines for Youth and Those Working with Youth. I agree that I have read and will abide by these Guidelines when working with Youth.

Signature: _____ Date: _____

Printed Name: _____

Parish/School/Diocesan Entity:

_____ ST. PATRICK CATHOLIC CHURCH _____

City: _____ MCHENRY _____

Witness: _____

Return this form to the Parish/School/Diocesan entity you identified on this form.

**CODE FOR THE PASTORAL USE OF TECHNOLOGY AND SOCIAL MEDIA
RECEIPT ACKNOWLEDGMENT**

I, _____, acknowledge that I have received the
(Name)

Diocese of Rockford's Code for the Pastoral Use of Technology and Social Media. I agree that I have read and will abide by this Code.

Signature: _____ Date: _____

Printed Name: _____

Parish/School/Diocesan Entity: _____ ST. PATRICK CATHOLIC CHURCH

City: _____ MCHENRY

Witness: _____

Return this form to the Parish/School/Diocesan entity you identified on this form.