VIRTUS TRAINING - PROTECTING GOD'S CHILDREN AND CORI FORM

For the safety of our children it is a policy of the Diocese of Springfield and St. Thomas the Apostle Parish/School that all parents who wish to volunteer in any capacity MUST complete the following requirements listed below before you can volunteer in the school or at any school event.

This policy is also for people other than parents who will be volunteering at a school event or working in the school at any time, including all faculty and staff.

1. Virtus Training - Protecting God's Children - All volunteers are required to do this training. Go to **www.virtusonline.org** and create your account in order to access the training session, Protecting God's Children. You will be required to be re-certified every 3 years. If you are having difficulty with Virtus, please call or email Donna Avery at the Office of Safe Environment and Victim Assistance, Diocese of Springfield.
Phone 413-452-0662 Email d.avery@diospringfield.org

2. CORI check as provided by the Criminal History Systems Board
CORI (Criminal Offender Record Information), forms must be sent back to the school office. A copy of an up-to-date license or passport must be sent with your completed CORI form. Keep in mind it can take up to 10 business days to process a CORI form. Once you are approved, a CORI is good for three years.

Diocese of Springfield

Office of Safe Environment and Victim Assistance (OSEVA)
65 Elliot Street, PO Box 1730, Springfield, MA 01102-1730
Telephone: 413-452-0662 Fax: 413-452-0678
E-Mail: d.avery@diospringfield.org

CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGMENT FORM

The Diocese of Springfield is registered under the provisions of MGL.c 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective, employees, subcontractors, or volunteers.

As a prospective or current employee, subcontract, or volunteer, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide to the Diocese of Springfield, Office of Safe Environment to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Diocese of Springfield, Office of Safe Environment with written notice of my intent to withdraw consent to a CORI check.

I understand, that The Diocese of Springfield, Office of Safe Environment may conduct subsequent CORI checks within one year from the date this form was signed by me. By signing below, I provide my consent to a CORI check and affirm that the information provided on this Acknowledgment Form is true and accurate.

SIGNATURE_____ **DATE**_____

Minor -Legal Guardians Signature_____ **DATE**_____

PLEASE CHECK:

☐ Parish Volunteer – Direct or unmonitored contact with children ☐ All other Parish Volunteer (not with children or vulnerable)

☐ Parish Volunteer – Ministering to persons over the age of 60, persons with disabilities, and other vulnerable population

☐ Priest ☐ Deacon ☐ Seminarian ☐ Paid Parish Staff ☐ Early Education

☐ Educator/**School** ☐ **School** Staff ☐ **School** Volunteer ☐ Contractor/Vendor ☐ Camp

☐Employee –Diocese Location/Position: _____

☐Volunteer –Diocese Location/Position: _____

_____

NAME OF PARISH/SCHOOL/AGENCY SUBMITTING CORI CITY/TOWN

The fields marked with an asterisk (*) are required by the Massachusetts department of Criminal Justice Information Services (DCJIS) for CORI processing.

******Please attach a copy of your U.S. Government Issued ID: Driver's License or Passport (COPY for OSEVA)**

***Last** Name (print): _____ Middle Initial: _____

***First** Name (print): _____ Suffix (Jr., Sr., etc.): _____ Female ☐ Male ☐

*Maiden Name or Former Last Names: _____

*Date of Birth (MM/DD/YYYY): _____ ***Last SIX digits** Social Security Number: ___ ___ - ___ ___ ___ ___

*Driver's License or ID Number: _____ *State Issue: _____ Expiration Date: _____

*Street Address: _____ *City: _____ *State: _____ * Zip: _____

Have you lived in Massachusetts for more than 3 years: ☐YES ☐ NO

☐ State other than MA ☐International Where: _____

Email: _____ Phone: _____

Parish or School VERIFICATION The above information was verified by reviewing the following form(s) of government-issued identification:

Verified By: _____ _____ _____

Printed Name of Verifying Parish/School Employee/Volunteer Signature of Verifying Employee/Volunteer Date

_____ _____

Michael Collins, Director, OSEVA Date