TRINITY CHRISTIAN
UNITED CHURCH OF CHRIST
SKIPPACK

SAFE CHURCH

POLICIES AND PROCEDURES

Safe Church Policy Concerning Abuse Prevention
STATEMENT OF PURPOSE

Trinity Christian United Church of Christ, Skippack, strives to provide a God-focused, Christ-centered environment. As part of our mission we are committed to fostering a safe, secure gathering of Christians who recognize that vulnerable populations need to be properly cared for and protected. We can accomplish this end by adhering to the set of policies and procedures regarding sexual misconduct and other forms of harassment as outlined in this manual. Such a safe environment is essential for children, youth, and adults, and we strive to protect the members and friends of our congregation. Not every situation can be anticipated. However, by adhering to the policies outlined herein and providing opportunities to raise awareness and guide our actions, we can achieve this intended purpose and reduce risk.

Trinity Christian United Church of Christ will adhere to the current state and local laws in effect at the time. (Please see the Appendix, Exhibit 1, for internet links regarding current State Laws particularly pertinent to Child Abuse regulations)

Based on action agreed upon at the Annual Congregational meeting on February 12, 2017, we attest this document was accepted as an official policy of Trinity Christian UCC Skippack.

Consistory President

Consistory Secretary

Pastor
Safe Church Policy Concerning Abuse Prevention

Policy Prohibiting Abuse, Exploitation and Harassment

As a community of Christian faith, Trinity Christian United Church of Christ is committed to creating and maintaining programs, facilities and a community in which members, friends, staff and volunteers can worship, learn and work together in an atmosphere free from all forms of discrimination, harassment, exploitation or intimidation. All persons associated with Trinity Christian United Church of Christ should be aware that the church is strongly opposed to Sexual Exploitation and Sexual Harassment and that such behavior is prohibited by church policy. It is the intention of the church to take action in an attempt to prevent and correct behavior that is contrary to this policy and, if necessary, to discipline those persons who violate this policy.

Ministerial Conduct

Consistent with our understanding of the priesthood of all believers, all Authorized Ministers, employees, elected and appointed lay leaders, and authorized volunteers are Ministers to the congregation.

It is important that every Minister to the church be adequately prepared and educated for the ministry in which they serve others, and to understand the ways in which their use or misuse of authority may impact others.

It is the policy of Trinity Christian United Church of Christ to encourage its Ministers to nurture safety within Ministerial Relationships by being attentive to self-care, education, maintaining appropriate boundaries, and the importance of referring those in need to supportive and helpful resources.

Sexual Exploitation or Sexual Harassment of parishioners or others by anyone engaged in ministry on behalf of Trinity Christian United Church of Christ is unethical behavior and will not be tolerated within this congregation.

Requirements for Commencing and Continuing Ministry

• Before beginning their duties, all Ministers will submit disclosure information as outlined in Exhibits E and F.

• Before beginning their duties, all Ministers will be personally interviewed to assess the suitability of their character and qualifications for the position they seek.
• The church will conduct a registered sex offender review for each Minister by searching their name on the Department of Justice website at www.nsopr.gov. This registered sex offender review will be repeated on an annual basis for all Ministers.

• Authorized Ministers of the church will attend all boundary workshops required by the Pennsylvania Southeast Conference of the United Church of Christ, or will attend at least one workshop on this topic every three years, whichever is more frequent.
RECRUITMENT POLICY
FOR INDIVIDUALS WORKING WITH MINORS

Recruiting Children/Youth Ministry Staff:

Our congregation welcomes volunteers who have been an active part of our congregation for a minimum of six (6) months to become involved with Educational and Youth Programs at various levels of commitment. Prior to participation with Educational and Youth Programs, each applicant shall receive the following screening depending on level of commitment:

Background Check Requirements – Pennsylvania’s Child Protective Services Law:

Pennsylvania’s amended Child Protective Services Law states that all individuals who may have “direct contact with children” to be Mandatory Reporters of suspected child abuse. The amended Law requires all Mandatory Reporters to obtain Pennsylvania State Police criminal background check and child abuse history clearances, currently once every 60 months. If the individual has lived in the Commonwealth of Pennsylvania continuously for at least the past 10 years, the person is required to sign the Disclosure Statement Application for Volunteers. For those mandatory reporters that have not lived in the Commonwealth of Pennsylvania continuously for at least the past 10 years will also be required to obtain an FBI criminal background check clearance, which includes fingerprinting. If a mandatory provider has obtained these required clearances for another organization, they may simply furnish copies to Trinity Christian United Church of Christ. (Please see the Appendix for the Current PA State Laws, Mandated Reporting Procedures, and for all required forms.)

Paid staff members who work with minors in fulfilling their duties for the church are also required to conform to Pennsylvania’s amended Child Protective Services Law. The amended Law requires such employees, who also are Mandatory Reporters, to obtain Pennsylvania State Police criminal background check and child abuse history clearances, currently once every 60 months. They also must obtain an FBI criminal background check clearance, which includes fingerprinting. Finally, these individuals must complete the three hour Mandated Reporter Training available through www.reportabusepa.pitt.edu.

The Consistory and Church Leadership reserves the right to suspend the participation in youth programs of any person suspected of committing an act of sexual or other inappropriate misconduct until the allegations of such misconduct have been fully investigated and referred to the Response Team.

Any person known to have committed a previous act of sexual or other inappropriate misconduct with children or youth shall be strictly prohibited from participating with Trinity Christian’s Educational and Youth Programs.
All applicants are required to read and agree to abide by all Trinity Christian United Church of Christ Children/Youth Ministry Policies and Procedures herein. Signature upon the appropriate Screening Application or Staff/Volunteer Acknowledgement denotes a willingness to remain in compliance with Trinity Christian United Church of Christ’s safety policies and procedures or their successors.

All volunteers who regularly work with minors must complete and submit disclosure documents as required by Pennsylvania state law (see Exhibit B, C, and D in the Appendix). This documentation must be complete and fully submitted before the individual is permitted to start their voluntary role.

Before beginning their duties, all prospective employees who work with minors in the church must undergo a background check, including but not necessarily limited to inquiries of references and a criminal history verification by a third-party vendor in accordance with Pennsylvania state law as summarized in the appendix to this manual. (See exhibits D and E.) Special note: If there is an urgent need for employment to begin before the individual has sufficient time to get all clearances completed, Pennsylvania Law allows submission of a special disclaimer form which can be submitted in the meantime, allowing a 90-day extension for new hires, provided that the individual not work with minors during that time period. (See exhibit F)

It is the policy of this church to provide adequate supervision and safeguards for youth activities. In situations where participants are not readily visible to each other, there will be no fewer than two adults present with children. Youth over the age of 12 may assist an adult in supervising children and youth activities; however, such assistance does not alter the requirement that at least two adults be present.

All volunteers and employees who work with minors must be fully acquainted with the content of this Policy and Procedures Manual. After reading the content, an acknowledgment form must be signed to attest to this fact. (See exhibit L in the appendix.) In particular, the obligations of a mandatory reporter are summarized in exhibit M.
Requirements for Outside, Non-church Groups Using the Facilities of Trinity Christian United Church of Christ

Trinity Christian United Church of Christ welcomes the opportunity for outside groups to make use of our church property for their meetings or special events. When such groups approach Trinity Christian to make such arrangements, the following policies are required:

- Notification of such requests must be forwarded to both the Property Committee and the individual designated by the Trinity Christian Consistory who oversees compliance with Pennsylvania state clearance laws.

- Groups providing programming which involves minors must provide, in writing, a statement that confirms that all of their adult leaders meet the requirements set forth by Pennsylvania state law for adults who work with minors. Under normal circumstances, such documentation must be put on file in the church office at least two weeks before the group’s activity begins. (See Exhibit G in the appendix)

- Groups providing programming for adults only must provide, in writing, a statement that confirms that no minors will be participants in their program and that no minors will be present during the activities. Under normal circumstances, such documentation must be put on file in the church office at least two weeks before their activity begins. (See Exhibit G in the appendix)

- The individual designated by the Trinity Christian Consistory who oversees compliance with Pennsylvania state clearance laws will inform the Property Committee when the group making the request has provided the required documentation referred to above, before final approval may be granted for their request.

- Requests for weddings and/or wedding receptions, funerals or funeral receptions, and family events do not require submission of the above-described documentation. Property Committee can grant or deny permission regarding the use of Trinity Christian facilities without necessarily contacting the individual designated by the Trinity Christian Consistory who oversees compliance with Pennsylvania state clearance laws.
CODE OF BEHAVIOR

CHILDREN/YOUTH MINISTRY STAFF

Volunteers who have taken active part in the life of the congregation for at least six months may be invited to become involved with Educational and Youth Programs at various levels of commitment. During this time, those planning to be directly involved in the life of the congregation shall accept the intentions provided by the following code of behavior.

**The Two Adult Rules:** The children and youth in both the Educational and Youth Fellowship Program of our congregation shall be under the care or supervision of two adults. An exception would exist if classes/groups are so constructed as to provide constant visual access and frequent observation by the Pastor, Christian Ed Director, VBS Director, Choir Directors, or their designee(s). Furthermore, no teacher, advisor, aide or anyone else working with our children or youth should place themselves in a compromising situation by being alone with a child or with children out-of-sight of other teachers, advisors, aides, or parents.

**Specific Guidelines for Adult Supervision:** Adult leaders for a youth ministry activity, function as representatives of the church, and as such are held to different standards than when acting as a parent or adult in their own family. The rules and guidelines of the church must be followed by all leaders at all events, thereby providing appropriate supervision for the youth. Illegalities and irresponsibility cannot be allowed. Supervision must be consistent, reasonable and prudent.

Adults are encouraged to remember that they will be providing both supervision and models of adult Christian behavior for the youth in their care, and should endeavor to see that the example they set is consistent with the value and expectation of the church community.

**Three Year Separation Rule:** When utilizing high school and young adults in the Educational Department, Youth Programs and Off-sight Activities there shall be a three-year separation between these young persons and those they supervise.

**Parental Consent:** Those youth under 18 years of age working with children and youth shall have signed, written consent of a parent or guardian before attending, chaperoning or supervising activities or programs away from our facilities.

**Discipline:** The purpose of discipline with children and youth is to maintain order in a manner consistent with the teaching of religious responsibility, respect and cooperation. No child shall be disciplined by the use of spanking, hitting, slapping, or any form of physical punishment. Verbal reprimands shall not include destructive criticism, insult or shouting. Teachers, advisors, aides and others helping in the classroom are encouraged to listen to the child, communicate expectations of appropriate behavior, use timeouts or give alternate choices.

**Overnight Rule:** Any and all adult chaperones supervising overnight stays at our facilities or on congregational sponsored trips shall have submitted all clearance information as required by Pennsylvania state law. At least two adult males will dorm with boys and two adult females with girls. Further, a signed written consent form is required which lists the names of advisors to be present. Last
minute substitute or additional advisors are permissible as long as parental permission of child/youth participants is secured (either signed or witnessed phone contact). (See Exhibit H in the Appendix)

**Youth Group Activities:** Physical contact such as wrestling, horseplay or other high contact games are not appropriate recreational activity. No adult leader, staff or volunteer should initiate or encourage physical or intimate contact with children or youth. Setting boundaries is the responsibility of the adults. The Youth Group is a group ministry. All participants are expected to remain with the group throughout the times listed in congregation publications. No pairing or otherwise separating off from the group to other parts of the building or grounds is permitted.

**Leaving and Locking:** At least two adult leaders must be present until the final youth or child is picked up by parents at the end of the activity. Parents are encouraged to respect concluding times.

**Drugs, Tobacco, Alcohol:** The use of any drugs, tobacco or alcoholic products at congregation facilities or congregation sponsored youth events is not permitted.

**Transportation:** Staff and adult leaders or teachers cannot transport children or youth between congregation facility and home except with permission. Transportation for field trips, or to church activities and events will be by groups to and from the congregation facility. All approved vehicles will travel as a caravan and will be supplied with a listing of each person occupying each vehicle. Cell phones will be in each vehicle along with cell phone (or home phone numbers) for communication. No youth group member is permitted to be a designated driver for any youth group events.

**Parental Guidelines:** Parents must know at all times where their children are, who they are with, and what they are doing. It is strongly encouraged that children 10 or under do not play in unsupervised areas.

**Reporting Responsibilities:** Any inappropriate conduct or relationship between an adult worker and a child or youth or any suspected violation of this code shall be promptly reported according to this policy reporting procedures. Mandated reporters must make an immediate and direct report of suspected child abuse to Childline either electronically at www.compass.state.pa.us/cwis or by calling 1-800-932-0313.

**Medical Release Form:** At the beginning of each program year (September 1 through August 31), parents/guardians of minors participating on events held in locations other than the church property will be asked to complete a Medical Release Form (Exhibit I in the Appendix). A copy of the completed forms will remain on file in the church offices; the originals will travel with the leaders of the event anytime they leave the church premises. A Standard Medical Information Sheet (Exhibit J) is required each program year for all children participating in events held at the church property.

**Youth Group Covenant:** At the beginning of each program year, all members of the Youth Group and their parents/guardians will be asked to sign the Youth Group Covenant (Exhibit K). These forms will remain on file in the church office.
**Off Premises Events:** Trip Permission Slips (Exhibit H) must be signed by a parent/guardian and must accompany the Youth Group along with copies of the Medical Release Form (Exhibit I) on all off-premises events or activities.

**Emergency Contact Requirement:** All program leaders shall obtain/maintain emergency contact information for all children/youth who participate in their program.

**Building Safety/Security:** The Property Committee shall design and maintain procedures related to building use that upholds the intent of this policy.

**Photo Release:** Photographs of minors engaged in activities at Trinity Christian United Church of Christ may be released by the church only with written permission by the parent or guardian. Such photographs could potentially be used for such purposes as publicity, illustration, advertising, or Web Content. (See Exhibit N in the Appendix)
REPORTING PROCEDURES

Procedure for handling suspected Child Abuse.

Mandated reporters must make an immediate and direct report of suspected child abuse to Childline either electronically at www.compass.state.pa.us/cwis or by calling 1-800-932-0313.

Procedures for Handling Complaints of Sexual Exploitation or Harassment

I. Generally

A. A subcommittee with no less than two members, one male and one female, will be established by Consistory in January of each year in preparation for the possibility of hearing complaints under this policy. The subcommittee, hereinafter referred to as “The Response Team,” will be familiar with the terms of this policy, as well as the established procedures of the church for dealing with a complaint.

B. Several approaches may be taken in addressing incidents of alleged sexual exploitation or harassment:

1. The complainant can attempt to resolve the matter directly with the respondent, the individual accused of sexual exploitation or harassment.

2. The complainant can report the incident to the Pastor, in an effort to resolve the matter informally.

3. If an informal resolution of the complaint does not seem wise, appropriate, possible, or does not succeed, the complainant may request that the Response Team institute formal proceedings which shall include the following steps:

   • The Response Team shall advise the Pastor and Consistory President of the receipt of all complaints and shall keep them apprised of ongoing steps and actions taken. If either the Pastor or Consistory President is the subject of the complaint, this notice requirement shall not apply as to that person.

   • The Response Team shall gather statements or other information from the individuals involved in the alleged exploitation or harassment and from others who may have pertinent information, such as qualified professional consultants, and present
such information to the Consistory or an appropriate subcommittee thereof.

- The Consistory, or an appropriate subcommittee thereof, shall make determinations and take actions appropriate to resolve the matter. These may include:

  a. finding that sexual exploitation or harassment has occurred, and that the appropriate body of the church is called upon to take action accordingly; such action may include one or more of the following:

    (i) a formal reprimand, with defined expectations for changed behavior;

    (ii) recommending or requiring psychological or psychiatric assessment, counseling and/or treatment;

    (iii) probationary standing, with the terms of the probation clearly defined;

    (iv) dismissal from employment or authorized volunteer position by, affiliation with, or membership in, the church.

  b. finding that sexual exploitation or harassment did not occur.

- The Response Team may seek the advice of legal counsel or others to advise it in performing its functions.

C. A written summary of the proceedings of the Consistory or appropriate subcommittee in such cases will be maintained.

D. The person(s) toward whom the inappropriate behavior is directed need not be the complainant. Moreover, neither consent nor acquiescence will excuse or exonerate inappropriate behavior. At any time the church may initiate or proceed with the formal complaint process.

E. In determining whether alleged conduct constitutes sexual harassment or exploitation, consideration shall be given to the record of the alleged incident(s) as a whole and to the totality of the circumstances, including the context in which the alleged incident(s) occurred.

F. Any person bringing a sexual harassment or exploitation complaint or assisting in investigating such a complaint will not be adversely affected in terms and conditions of employment or church membership or affiliation, or otherwise discriminated against or discharged.
II. Child Abuse

Apart from any legal requirements, the Trinity Christian United Church of Christ will make a report to appropriate authorities, including but not limited to the Pennsylvania Department of Children and Family Services, if at any time the church has reasonable cause to believe that a minor may be an abused or neglected child. Any Minister of the church who becomes aware of facts or circumstances that child abuse or neglect has occurred or that there exists a substantial risk that child abuse or neglect may occur in the reasonably foreseeable future shall immediately report the matter to the Pastor and President of Consistory so that the church may take appropriate action in a timely manner. The Pennsylvania Child Abuse Hotline currently is: 1-800-932-0313. It’s web address is www.compass.state.pa.us/cwis.

III. Clergy

Apart from any disposition of the matter by the church, all allegations of behavior which call into question the fitness for ministry of the Pastor will promptly be forwarded to the Church & Ministry Committee of the Pennsylvania Southeast Conference of the United Church of Christ.

The Pennsylvania Southeast Conference may be contacted at: 484-949-8774.

FUTURE CHANGES TO THIS MANUAL

Changes to any of the content regarding the recruitment policy (beginning on page 5), use of the property by outside groups (beginning on page 7), the code of behavior (beginning on page 8), or any of the content in the Appendix can be amended by Consistory after consultation with the appropriate committee of the church (Christian Education or Property). Changes in other content will require action at a Congregational Meeting with two weeks advance notice of such changes.
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Trinity Christian United Church of Christ
Safe Church Policies and Procedures Manual

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State Law, Assorted Resources, and Quick Reference Material

To report suspected child abuse go to:
https://www.compass.state.pa.us/cwis/public/home
or call 1-800-932-0313 (ChildLine)

Call 911 if the child is in immediate danger

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Department of Human Services

Pennsylvania Keep Kids Safe Website
http://keepkidssafe.pa.gov/

Special Highlights of the Keep Kids Safe Site
FAQs:  http://keepkidssafe.pa.gov/faqs/index.htm

Pennsylvania State information regarding forms needed for clearances

Mandating Reporting

FAQs regarding mandated reporters (Pennsylvania Family Support Alliance)

Prevent Child Abuse Pennsylvania
FAQs regarding mandated reporters
http://preventchildabusepa.org/common-questions

United Church of Christ Southeast Conference Safe Church and Child Abuse Clearance Resources

https://psec.org/resources/safe-church-child-abuse-clearances-resources/
Sites providing clearance form access

PA State Criminal Background Check
https://epatch.state.pa.us/

PA Child Welfare Portal (for Child Abuse Clearances)
https://www.compass.state.pa.us/cwis/public/home

FBI Fingerprinting (Idemia)
https://www.identogo.com/

Online Course Training Regarding Child Abuse
https://www.reportabusepa.pitt.edu/webapps/portal/execute/tabs/tabAction?tab_tab_group_id=9_1_1
Exhibit B
Background Checklist for TCUCC Volunteers Who Work with Minors

Trinity Christian United Church of Christ
Box 538
Skippack, PA  19474
610-584-4054
trinityskippacksec2@gmail.com

December 2016

Background Checklist/Instructions for Trinity Christian United Church of Christ. (Church Volunteers)

Under the current law and the Trinity Christian UCC Safe Church Policy, ALL volunteers who have contact with the children of Trinity Christian United Church of Christ are required to submit the following completed forms to the person in charge of maintaining clearance records.

Trinity Christian Staff/Volunteer Acknowledgement Form Regarding Trinity Christian UCC Safe Church Policy

This is needed for volunteers working with minors at Trinity Christian United Church of Christ. Please fill out the Acknowledgement Form and return to the individual in charge of tracking clearances.

Trinity Christian UCC Disclosure Items

These are needed for volunteering with Trinity Christian United Church of Christ. Please submit all of the following items to the person in charge of tracking clearances.

____ Child Abuse Clearance
This must be done every 5 years and is needed to volunteer with Trinity Christian United Church of Christ. Please complete this online and return the clearance document to the person in charge of maintaining these records.

____ Criminal History Record
This must be done every 5 years and is needed to volunteer with Trinity Christian United Church of Christ. Please complete this online and return the clearance document to the person in charge of maintaining these records.

____ Special Disclaimer form for Volunteers
(*If you have been a resident in the State of Pennsylvania during the entirety of the previous ten-year period)

This must be done every 5 years and is needed to volunteer with Trinity Christian United Church of Christ. Please sign and return the "Disclosure Statement Application for Volunteers" to the person in charge of maintaining these records. Please note, IF YOU HAVE LIVED in the state of Pennsylvania for the last consecutive 10 years, you do not have to be fingerprinted.

___ *FBI Fingerprinting (*If you have NOT lived in the State of Pennsylvania in the last consecutive ten (10) years)

This needs to be done every 5 years and is needed to volunteer with Trinity Christian United Church of Christ if you have not lived in Pennsylvania for the last consecutive ten (10) years. Electronically, register with IDEMIA at https://www.identogo.com/ OR call 844-321-2124. Use the pull down menu to select Pennsylvania, and GO will take you to a new page. Scroll down and select “Digital Fingerprinting.” On the next page, you will be asked to input a Service Code. As a church volunteer, use 1KG6ZJ. (Don’t worry about the fact that this then appears to identify you as a DHS Volunteer.) Continue to use the new links as appropriate, to get registered for FBI Fingerprinting Clearance. You will need to pay for this personally with a credit or debit card. Print out your receipt. Your receipt will have your registration number on it. Please provide the person in charge of maintaining these records with your registration number.

Please bring your receipt and one of the following forms of identification with you to your fingerprint session: state issued driver's license, US active duty, retiree, or reservist military ID card, US Passport, college issued student ID, resident alien card issued since 1997, temporary resident identification card, or employment authorization card with you to a IDEMIA fingerprinting location. Please note you will need the registration number for your session.

Once you have been fingerprinted, you will receive the result in the mail. Please complete this online and return the original of this document to the person in charge of the clearance along with your paid receipt.

The person in charge of maintaining these records will make a copy of the document and will initiate steps with the treasurer for the cost of the fingerprint procedure.

Optional but Recommended Mandated Reporting Training

Volunteers can choose to take the free online training for Mandated Reporting by going to www.reportabusepa.pitt.edu. Once completed, a certificate can be printed. Please bring this certificate so that the date can be documented in your file.
Exhibit C
AFFIRMATION OF CONTINUOUS RESIDENCE IN PENNSYLVANIA FOR VOLUNTEERS IN LIEU OF FBI CLEARANCE

I, ____________________________, swear or affirm that I have been a continuous resident of Pennsylvania for the 10 years preceding today’s date.

I have provided the results of a Pennsylvania State Police Background Check and a Pennsylvania Child Abuse History Clearance to the individual identified by the Trinity Christian UCC Skippack church Consistory to oversee the collection of clearance files.

I swear or affirm that I am not disqualified from service under 23 Pa. C. S. § 6344.2 in that no cause exists under 23 Pa. C.S. § 6344(c) for denying my participation as a volunteer in the church’s programs, including the Sunday school, vacation Bible school, church nursery, youth group, and social committee activities. Specifically, I swear or affirm that:

- I have not been named in the Statewide database as the perpetrator of a founded report committed with the five-year period immediately preceding the date on my Pennsylvania Child Abuse History Clearance referenced above.
- I have not been convicted of any of the following offences under Pennsylvania Title 18 (relating to crimes and offense) or equivalent crime under Federal law or the law of another state:

  Chapter 25 (relating to criminal homicide).
  Section 2702 (relating to aggravated assault).
  Section 2709 (relating to stalking).
  Section 2901 (relating to kidnapping).
  Section 2902 (relating to unlawful restraint).
  Section 3121 (relating to rape).
  Section 3122.1 (relating to statutory sexual assault).
  Section 3123 (relating to involuntary deviate sexual intercourse).
  Section 3124.1 (relating to sexual assault).
  Section 3125 (relating to aggravated indecent assault).
Section 3126 (relating to indecent assault).

Section 3127 (relating to indecent exposure).

Section 4302 (relating to incest).

Section 4303 (relating to concealing death of child).

Section 4304 (relating to endangering welfare of children).

Section 4305 (relating to dealing in infant children).

A felony offense under section 5903(b) (relating to prostitution and related offenses).

Section 5903(c) or (d) (relating to obscene and other sexual materials and performances).

Section 6301 (relating to corruption of minors).

Section 6312 (relating to sexual abuse of children).

The attempt, solicitation or conspiracy to commit any of the offenses set forth above.

- I swear that I have not been convicted of a felony offense under the act of April 14, 1972 (P. L. 233, No. 64), known as The Controlled Substance, Drug, Device and Cosmetic Act, committed within the five-year period immediately preceding the date on my Pennsylvania State Police Background Check, referenced above.

I agree that I must inform the individual identified by the Trinity Christian UCC Skippack church Consistory to oversee the collection of clearance files of any change in the above circumstances within 72 hours of such change occurring.

____________________________________                    _________________________________
Signature                                                                                   Witnessed by individual
Designated by Consistory to monitor clearance records

____________________________________
Print Name

____________________________________
Date signed
Exhibit D

To help you out with the online forms if you choose to complete the applications that way:

1. Pennsylvania Child Abuse History Clearances (CY113) - (no fee for volunteers; fee charged for employees, which will be reimbursed by the church upon submission of receipts and all required clearance documents)

**Electronically:** Log on to the Child Welfare Information Solution (CWIS) self-service portal https://www.compass.state.pa.us/cwis/public/home. In the “Welcome to the Child Welfare Portal” click on “Create A New Account” and follow the prompts to set up an account which will allow you to request the child-abuse clearances. You will need an email address to create an account. A credit card is required for payment. Applicants will receive their results through an automated system and will be able to view and print their results online. The self-service portal also provides the ability for organizations to create business accounts to prepay for child abuse clearances and have online access to the results.

**Mail:** Download and print a form by logging on to the PA Department of Human Services website. You can also stop by any County Intermediate Unit or call them for a copy of this form. Payment by mail is by money order only, made out to the Department of Public Welfare.

2. Pennsylvania Criminal Record Checks (SP4-164) - (no fee for volunteers; fee charged for employees, which will be reimbursed by the church upon submission of receipts and all required clearance documents)

**Electronically:** Log on to https://epatch.state.pa.us/. Click on “Submit a New Record Check” (mid-page). You will then need to “accept terms” and then complete the on-line form. A credit card is required to cover the fee. In most instances, you should receive an immediate result if no criminal record exists.

**Mail:** Complete and mail the Pennsylvania State Police Request for Criminal Record Check to the Pennsylvania State Police at the address listed on the right side of the form and include a money order.

3. Federal Bureau of Investigation (FBI) Fingerprinting (fee is charged for those required to obtain this clearance, which will be reimbursed by the church upon submission of receipts and all required clearance documents) (Submission is required for employees who work with minors and for volunteers living in Pennsylvania less than 10 consecutive years) (Criminal Background Checks which includes submission of fingerprints)

1. Register with IDEMIA at https://www.identogo.com/ (print out the registration number) or over the phone by calling 844-321-2124 (write down registration number) Monday through Friday from 8 to 6 pm. Bring that registration number to the fingerprint site. NOTE: Once on
the homepage, you will need to pull down the Pennsylvania option, and once taken to the state page, scroll down and select the “Digital Fingerprinting” option from the five boxes displayed. On the next page, Church volunteers should enter the code 1KG6ZJ and church employees will enter the service code 1KG756. (Do not worry about the fact that this seems to indicate that you are a DHS Volunteer or Employee!) Payment can be made by credit or debit card. You will need to bring confirmation of payment to the fingerprint session. OR you may pay with a money order payable to IDEMIA at the site.

2. Fingerprint location hours, address, and appointment information is listed on the above website (some locations require an appointment, some do not).

3. You will need to bring one of the following forms of identification with you for your fingerprint session - state issued driver’s license - US active duty retiree or reservist military ID card - US passport - college issued student ID - resident alien card issued since 1997 - temporary resident identification card - employment authorization card

4. Provide your employer/volunteer organization with your registration number.
Exhibit E
Background Checklist of TCUCC Professional Employees Who Work with Minors

Trinity Christian United Church of Christ
Box 538
Skippack, PA 19474
610-584-4054 trinityskippacksec2@gmail.com

December 2016

Background Checklist/Instructions for Trinity Christian United Church of Christ. (Paid Employees)

Under the current law and the Trinity Christian UCC Safe Church Policy, ALL paid employees who work for Trinity Christian United Church of Christ submit the following completed forms to the person in charge of maintaining clearance records.

**Trinity Christian Staff/Volunteer Acknowledgement Form** Regarding Trinity Christian UCC Safe Church Policy

This is needed for employment with Trinity Christian United Church of Christ. Please fill out the Acknowledgement Form and return to the individual in charge of tracking clearances.

**Trinity Christian UCC Disclosure Items**

These are needed for volunteering with Trinity Christian United Church of Christ. Please submit all of the following items to the person in charge of tracking clearances.

______ Child Abuse Clearance

This must be done every 5 years and is needed to volunteer with Trinity Christian United Church of Christ. Please complete this online and return the clearance document to the person in charge of maintaining these records.

______ Criminal History Record
This must be done every 5 years and is needed to volunteer with Trinity Christian United Church of Christ. Please complete this online and return the clearance document to the person in charge of maintaining these records.

FBI Fingerprinting

This needs to be done every 5 years and is needed for employees with Trinity Christian United Church of Christ who work with minors. Electronically, register with IDEMIA System at https://www.identogo.com/ OR call 844-321-2124. Enter under the Pennsylvania Department of Human Services; on the right-hand side, click on "Register Online", and continue to complete the online application. You will need to pay for this personally with a credit or debit card. Print out your receipt. Your receipt will have your registration number on it. Please provide the person in charge of maintaining these records with your registration number.

Please bring your receipt and one of the following forms of identification with you to your fingerprint session: state issued driver's license, US active duty, retiree, or reservist military ID card, US Passport, college issued student ID, resident alien card issued since 1997, temporary resident identification card, or employment authorization card with you to a IDEMIA fingerprinting location. Please note you will need the registration number for your session.

Once you have been fingerprinted, you will receive the result in the mail. Please complete this online and return the original of this document to the person in charge of the clearance along with your paid receipt.

The person in charge of maintaining these records will make a copy of the document and will initiate steps with the treasurer for the cost of the fingerprint procedure.

Mandated Reporting Training

Online training — Mandated Reporting: www.reportabusepa.pitt.edu. All employees of Trinity Christian UCC are required to do the online training. Once completed, a certificate can be printed. Please bring in this certificate so that the date can be documented in your file.

Reimbursement of expenses for clearances

Expenses incurred to obtain the copies of each of the required clearance forms will be reimbursed by the church upon submission of receipts and all of the necessary clearances.
Exhibit F
AFFIRMATION FOR PROVISIONAL EMPLOYEES WHO HAVE NOT OBTAINED COMPLETED CLEARANCES

I, ____________________________, understand that I am being offered employment on a provisional basis for up to 90 days pending the successful completing of a Pennsylvania State Police Background Check, a Pennsylvania Child Abuse History Clearance, and a Federal Bureau of Investigation Clearance as well as an assessment of satisfactory performance.

I have requested the above-referenced clearances and have provided a copy of the completed request to the individual identified by the Trinity Christian UCC Skippack church Consistory to oversee the collection of clearance files.

I swear or affirm that have not been disqualified from employment under 23 Pa. C.S. § 6344(c). Specifically, I swear or affirm that:

- I have not been named in the Statewide database as the perpetrator of a founded report committed with the five-year period immediately preceding the date on my Pennsylvania Child Abuse History Clearance referenced above.

- I have not been convicted of any of the following offences under Pennsylvania Title 18 (relating to crimes and offense):

  - Chapter 25 (relating to criminal homicide).
  - Section 2702 (relating to aggravated assault).
  - Section 2709 (relating to stalking).
  - Section 2901 (relating to kidnapping).
  - Section 2902 (relating to unlawful restraint).
  - Section 3121 (relating to rape).
  - Section 3122.1 (relating to statutory sexual assault).
  - Section 3123 (relating to involuntary deviate sexual intercourse).
  - Section 3124.1 (relating to sexual assault).
  - Section 3125 (relating to aggravated indecent assault).
  - Section 3126 (relating to indecent assault).
  - Section 3127 (relating to indecent exposure).
Section 4302 (relating to incest).

Section 4303 (relating to concealing death of child).

Section 4304 (relating to endangering welfare of children).

Section 4305 (relating to dealing in infant children).

A felony offense under section 5903(b) (relating to prostitution and related offenses).

Section 5903(c) or (d) (relating to obscene and other sexual materials and performances).

Section 6301 (relating to corruption of minors).

Section 6312 (relating to sexual abuse of children).

The attempt, solicitation or conspiracy to commit any of the offenses set forth above.

- I have not been convicted of an offense similar in nature to those crimes listed above under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of Pennsylvania.

- I swear that I have not been convicted of a felony offense under the act of April 14, 1972 (P. L. 233, No. 64), known as The Controlled Substance, Drug, Device and Cosmetic Act, committed within the five-year period immediately preceding the date on my Pennsylvania State Police Background Check, referenced above.

I understand that upon the completion of any or all of the Pennsylvania State Police Background Check, the Pennsylvania Child Abuse History Clearance, and the Federal Bureau of Investigation Clearance, if information reveals that I am disqualified from employment pursuant to 23 Pa. C. S. § 6344(c), I will be terminated immediately.

I understand that I will not be permitted to work alone with children and that I must work in the immediate vicinity of a permanent employee at all times until the successful completion of the clearances referenced above. Failure to abide by this provision shall result in my immediate termination regardless of the status of my requested clearances.

____________________________________                    _________________________________
Signature                                                                                   Witnessed by individual designated
                                                                                          by Consistory to monitor clearance
                                                                                          records or Consistory President or
                                                                                          chair of search committee for the
                                                                                          position being offered

____________________________________                _________________________________
Print Name                                                 Date signed
Letter to Outside, Non-church Groups Requesting Use of Church Property

Trinity Christian UCC
Box 538
Skippack, PA 19474

[name/address of requesting group]
[date]

Dear [______]

In 2014 the Pennsylvania legislature passed bill HB 435-PA, the PA Child Abuse Law, and subsequently has enacted additional legislation regarding the collection of appropriate clearances for adult volunteers and employees who provide leadership and oversee activities with minors. Not surprisingly, Trinity Christian UCC in Skippack is required to conform to the dictates of the law, given our work with children in our Sunday school, Nursery, etc. We have an ongoing procedure in place to make sure our volunteers and employees obtain the required clearances mandated by the state laws.

We have also received information from our denomination’s local conference and our insurance board requires that outside groups meeting on our property must also be in compliance with state law. To that end, we need to have written documentation on file in our church office regarding [__group__________].

If your group includes training, leadership, or activities for children or youth (any minor below the age of 18) you are required to conform to the dictates of the state law in order to hold your meetings at Trinity. If such is the case, we need a letter from you as leader of the group confirming that all of your adults who are in attendance and working with the children hold the appropriate clearances as required by state law.

On the other hand, if you provide no activities which involve minors and if no minors are present when your group meets, then we require a letter from you confirming these two facts. (Note: If minors are in attendance and are under the care of adults, these individuals are subject to the state law and your group falls into the category described in the previous paragraph.)

Under no circumstance are minors permitted to be present and not attended to by a responsible adult.

You might be interested in looking at the information our conference provides. This can be found at https://psec.org/resources/safe-church-child-abuse-clearances-resources/.

Notice in particular point four under “Frequently asked questions”:

If you wish to call me, I can be reached at 610-584-6448.

Thank you,
Ned W. Schillow
Exhibit H
Template for Overnight Event Permission Slip

Trinity Christian United Church of Christ Overnight Trip to _______________________

__________________________________________(Youth’s name) has my permission to attend
the _____________________________ Overnight at ______________________________, which
is located at __________________________________

The overnight trip will take place on ___________________________. The cars will leave at
_____________ and will return at approximately _________________ on
_____________________

I understand that the trip will leave from the Trinity Church, located at 2009 Church Road, Skippack,
PA. I also understand that I am responsible for having my child picked up from the church at
_________ on ____________.

The leaders for this event include the following individuals:

________________________________,  ______________________________,
_______________________,  and ___________________________.

I further agree that the health history on file at the church is correct and complete as far as I know,
and the person herein described has permission to engage in all activities except as noted. I hereby
grant permission for the leaders in charge of the event to seek emergency medical treatment including
ordering x-rays or routine tests. I request and authorize hospitals and/or other emergency treatment
facilities to have access to the information contained in this form and the health history form in order
to provide all necessary medical care for my child while he/she is in attendance at this event, and give
permission to the leaders to arrange necessary related transportation for my child. In the event I
cannot be reached in an emergency, I hereby give permission to the physician selected by the leaders
of this trip to secure and administer treatment, including hospitalization, for the person named above.
I also agree to assume any financial responsibility for my child's care. I agree to the release of any
records necessary for insurance purposes. And, under the HIPPA code, I give permission to release
information to the trip leaders regarding diagnosis, treatment, and necessary prescriptions. I
acknowledge that no representations, warranties or guarantees as to the results or cures will be made.
I also understand that there are inherent risks to my child in participating in this event, even with the
best of circumstances. With such knowledge I hereby accept such risks, and having read all of the
above information, I hereby give permission for my son/daughter to attend this event.

I understand that __________________ will be used for transportation, and I give permission for my
son/daughter to be transported by an adult driven vehicle.
I will not hold the sponsoring organizations or any individual participating in making this activity possible, responsible for any mishap in this project.

Print name ________________________________ Signed

______________________________________(Parent or Guardian)

Phone number ________________________________ Date

_____________________________________
(If not a cell phone number, check here ______)
Exhibit I

Trinity Christian UCC Medical Information Sheet for Individuals Involved in Church Activities Which Take Place off of Church Property

Valid from September 1, [ ] through August 31, [ ]

Please inform Trinity Christian if any changes occur throughout this time period

PLEASE PRINT CLEARLY

Son’s/daughter’s Name________________________________
Parent/Legal Guardian’s Name ______________________________
Home Address:
___________________________________________________________________
Home Phone: __________________________    Cell Phone: ___________________________
Work Phone: ___________________________

Has your son/daughter had any medical problems of which an emergency physician would need to be aware (e.g. but not limited to asthma; allergies to drugs, bee stings, food or other; chronic illness; headaches; heart ailment; epilepsy; diabetes; physical handicaps; emotional problems; or dietary restrictions)?

YES                          NO

If “Yes” please list all conditions/allergies (food, medication, bee stings, others) and describe:


Should there be any limits on physical activity?   YES      NO

At the present time, is this person under a physician’s care? YES     NO
If “Yes” please describe

List dosage and medications you are sending with your child along with, why they are taken, and any possible side effects.
Date of last Tetanus Booster _____________________

Are there any over-the-counter medications that you DO NOT want administered to your child? If so, list them below:

Is this person covered by medical insurance? YES NO
Name of Insurance Company: ________________________________
Policy number: __________________________
Name of insured: _____________________________ Relationship to participant __________________________

Is pre-authorization required by your insurance company for emergency services? YES NO
If so, what is the phone number of the insurance company? (____) ________________________________.

Name of emergency contact person (other than parent or guardian) __________________________
Home Address: _______________________________________________________________________
Home Phone: ___________________________ Cell Phone: ___________________________
Work Phone: ___________________________

Additional emergency contact person ____________________________________________
Home Phone: ___________________________ Cell Phone: ___________________________

PLEASE ATTACH COPIES OF THE FRONT AND BACK OF YOUR CHILD’S INSURANCE CARDS TO THIS FORM

I further agree that the health history on file at the church is correct and complete as far as I know, and the person herein described has permission to engage in all activities except as noted. I hereby grant permission for the leaders in charge of the event to seek emergency medical treatment including ordering x-rays or routine tests. I request and authorize hospitals and/or other emergency treatment facilities to have access to the information contained in this form and the health history form in order to provide all necessary medical care for my child while he/she is in attendance at this event, and give permission to the leaders to arrange necessary related transportation for my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the leaders of this trip to secure and administer treatment, including hospitalization, for the person named above.
I also agree to assume any financial responsibility for my child’s care. I agree to the release of any records necessary for insurance purposes. And, under the HIPPA code, I give permission to release information to the trip leaders regarding diagnosis, treatment, and necessary prescriptions. I acknowledge that no representations, warranties or guarantees as to the results or cures will be made. I also understand that there are inherent risks to my child in participating in this event, even with the best of circumstances. With such knowledge I hereby accept such risks, and having read all of the above information, I hereby give permission for my son/daughter to attend this event.

Print name ___________________________      Signed ___________________________

__________________________      ____________________________
(Parent or Guardian)      Date

(Note: If insurance or other information changes, please let us know.)
Exhibit J

Trinity Christian UCC Standard Medical Information Form
Valid from September 1, [ ] through August 31, [ ]
Please inform Trinity Christian if any changes occur throughout this time period
PLEASE PRINT CLEARLY

Son’s/daughter’s Name________________________________
Home Address: ___________________________________________________________________
Home Phone: __________________________ Cell Phone: _____________________________

Mother’s Name________________________________ Home Phone __________________________
Home address __________________________ Work Phone __________________________
_____________________________________________ Cell Phone _____________________________

Father’s Name________________________________ Home Phone __________________________
Home address __________________________ Work Phone __________________________
_____________________________________________ Cell Phone _____________________________

Has your son/daughter had any medical problems of which an emergency physician would need to be aware (e.g. but not limited to asthma; allergies to drugs, bee stings, food or other; chronic illness; headaches; heart ailment; epilepsy; diabetes; physical handicaps; emotional problems; or dietary restrictions)?

YES                          NO

If “Yes” please list all conditions/allergies (food, medication, bee stings, others) and describe:

Should there be any limits on physical activity? YES       NO

At the present time, is this person under a physician’s care? YES    NO
If “Yes” please describe
List dosage and medications you are sending with your child along with, why they are taken, and any possible side effects.

Date of last Tetanus Booster _____________________

Name of emergency contact person (other than parent or guardian) __________________________________________

Home Address: ___________________________________________________________________________________

Home Phone: ___________________________  Cell Phone: ___________________________

Work Phone: ___________________________

Signature of Parent/Guardian                Date

In the event of an emergency, every effort will be made to contact the parent or guardian. I understand that if I cannot be contacted, the Church staff will obtain emergency care and I will be responsible for the payment of the expenses that are incurred.

To the best of my knowledge, the information provided on this form is correct.

Signature of Parent/Guardian                Date
Exhibit K

Trinity Christian United Church of Christ Youth Group

COVENANT

The stated mission of Trinity Christian’s Youth Group is to offer opportunities for youth in grades 5 and higher to grow in faith, develop their gifts for Christian leadership, practice hospitality, reach out and care for people around them, and honor their commitments to God and to each other. Goals for individual meetings and events include growing and learning together, exploring and sharing our faith with one another, and having fun while bringing out the best in each other. So that these things can happen, all participants in Trinity’s Youth Group are asked to join in this covenant:

With awareness of and trust in God’s presence with us, when participating in any Youth Group meeting, program or event, I covenant

 ✤ To participate fully in all aspects of the meeting/program/event,
 ✤ To reach out to welcome new people, make new friends, strengthen relationships, and treat all people with dignity and respect,
 ✤ To be where I am supposed to be when I am supposed to be there,
 ✤ To use the facilities made available to me with care,
 ✤ To respect the rights and personal property of others,
 ✤ Not to bring a weapon of any kind with me,
 ✤ Not to smoke, possess or use alcohol or other controlled substances, or engage in sexual activity,
 ✤ Not to enter the sleeping area of a member of the opposite sex, and
 ✤ To refrain from any other activities which may interfere with the mission and goals of Trinity Christian’s Youth Group.

Youth: By signing below I agree to live by this covenant. I understand that any violation of these expectations will immediately end my participation in the meeting/program/event and may result in my being sent home at my own expense.

Participant’s Signature ____________________________ Date ____________

Parent: By signing below I agree to support the Youth Group leadership team in their efforts to fulfill the group’s mission and goals. I understand what is expected, accept the “one strike and you’re out” rule, and will assume any costs involved with an early termination of my child’s participation in any meeting, program or event due to a violation of these expectations.

Parent’s Signature ____________________________ Date ____________
Exhibit L

STAFF/VOLUNTEER ACKNOWLEDGEMENT

The undersigned agrees to comply with any safety policies and procedures of Trinity Christian United Church of Christ. The undersigned further acknowledges that he or she has received a copy and read Trinity Christian United Church of Christ's Children/Youth Ministry Policies and Procedures in its entirety and has had an opportunity to ask questions regarding Trinity Christian United Church of Christ's safety policies and procedures and safety practices.

Dated this _______ day of _____________, 20 ________.

_________________________________
Staff/Volunteer signature

_________________________________
Printed Name

_________________________________
Witness Signature                                           Date

_________________________________
Printed Name
Exhibit M

PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES

Mandated Reporter
Frequently Asked Questions

What is the Child Protective Services Law (CPSL)?
The PA Child Protective Services Law (CPSL) was signed into law in 1975. It was enacted to protect children from abuse, allow the opportunity for healthy growth and development, and, whenever possible, preserve and stabilize the family.

What is child abuse?
Child abuse, according to the CPSL, means intentionally, knowingly or recklessly doing any of the following:

- Causing bodily injury to a child through any recent act or failure to act.
- Fabricating, feigning or intentionally exaggerating or inducing a medical symptom or disease which results in a potentially harmful medical evaluation or treatment to the child through any recent act.
- Causing or substantially contributing to serious mental injury to a child through any act or failure to act or a series of such acts or failures to act.
- Causing sexual abuse or exploitation of a child through any act or failure to act.
- Creating a reasonable likelihood of bodily injury to a child through any recent act or failure to act.
- Creating a likelihood of sexual abuse or exploitation of a child through any recent act or failure to act.
- Causing serious physical neglect of a child.
- Causing the death of the child through any act or failure to act.

Child abuse also includes certain acts in which the act itself constitutes abuse without any resulting injury or condition. These recent acts include any of the following:

- Kicking, biting, throwing, burning, stabbing or cutting a child in a manner that endangers the child.
- Unreasonably restraining or confining a child, based on consideration of the method, location or the duration of the restraint or confinement.
- Forcefully shaking a child under one year of age.
- Forcefully slapping or otherwise striking a child under one year of age.
- Interfering with the breathing of a child.
- Causing a child to be present during the operation of a methamphetamine laboratory, provided that the violation is being investigated by law enforcement.
Leaving a child unsupervised with an individual, other than the child's parent, who the parent knows or reasonably should have known was required to register as a Tier II or III sexual offender or has been determined to be a sexually violent predator or sexually violent delinquent.

"Recent" is defined as an abusive act within two years from the date the report is made to ChildLine. Sexual abuse, serious mental injury, serious physical neglect and deaths have no time limit.

Who can be a perpetrator?

A perpetrator of child abuse can be a:

- child's parent,
- spouse or former spouse of the parent,
- paramour or former paramour of the parent,
- person 14 years of age or older responsible for the welfare of a child or having direct contact with children as an employee of child-care services, a school or through a program, activity or service such as a baby sitter or day care staff person,
- individual residing in the same home as the child who is at least 14 years of age, or
- relative who is 18 years of age or older who does not reside in the same home as the child, but is related within the third degree of consanguinity or affinity by birth or adoption to the child.

A perpetrator of child abuse for failure to act can be a:

- child's parent,
- spouse or former spouse of the parent,
- paramour or former paramour of the parent,
- person 18 years of age or older who is responsible for the child's welfare or who resides in the same home as the child.

Mandated reporters do not have to determine whether or not the person meets the definition of perpetrator in order to make the report.

Who is a mandated reporter?

The following adults are considered mandated reporters and are required to report suspected child abuse if they have reasonable cause to suspect that a child is a victim of child abuse:

- A person licensed or certified to practice in any health-related field under the jurisdiction of the Department of State.
- A medical examiner, coroner or funeral director.
- An employee of a health care facility or provider licensed by the Department of Health, who is engaged in the admission, examination, care or treatment of individuals.
- A school employee.
- An employee of a child-care service who has direct contact with children in the course of employment.
• A clergyman, priest, rabbi, minister, Christian Science practitioner, religious healer or spiritual leader of any regularly established church or other religious organization.
• An individual paid or unpaid, who, on the basis of the individual's role as an integral part of a regularly scheduled program, activity or service, is a person responsible for the child's welfare or has direct contact with children.
• An employee of a social services agency who has direct contact with children in the course of employment.
• A peace officer or law enforcement official.
• An emergency medical services provider certified by the Department of Health.
• An employee of a public library who has direct contact with children in the course of employment.
• An individual supervised or managed by a person listed above, who has direct contact with children in the course of employment.
• An independent contractor who has direct contact with children.
• An attorney affiliated with an agency, institution, organization or other entity, including a school or regularly established religious organization that is responsible for the care, supervision, guidance or control of children.
• A foster parent.
• An adult family member who is a person responsible for the child's welfare and provides services to a child in a family living home, community home for individuals with an intellectual disability or host home for children which are subject to supervision or licensure by the department under Articles IX and X of the Public Welfare Code.

When must mandated reporters make a report?
Mandated reporters are required to make a report of suspected child abuse if they have reasonable cause to suspect that a child is a victim of child abuse under any of the following circumstances:
• They come into contact with the child in the course of employment, occupation and practice of a profession or through a regularly scheduled program, activity or service.
• They are directly responsible for the care, supervision, guidance or training of the child, or are affiliated with an agency, institution, organization, school, regularly established church or religious organization or other entity that is directly responsible for the care, supervision, guidance or training of the child.
• A person makes a specific disclosure to the mandated reporter that an identifiable child is the victim of child abuse.
• An individual 14 years of age or older makes a specific disclosure to the mandated reporter that the individual has committed child abuse.

It is not required that the child come before the mandated reporter in order to make a report of suspected child abuse nor are they required to identify the person responsible for the child abuse to make a report of suspected child abuse.
What if a mandated reporter has general concerns about a child, but does not suspect abuse?
Concerns related to the safety of children including, but not limited to inadequate housing, clothing and supervision, can be referred to ChildLine or the county children and youth agency for assessment as general protective services cases.

How do mandated reporters make a report of suspected child abuse?
Mandated reporters must make an immediate and direct report of suspected child abuse to ChildLine either electronically at [www.compass.state.pa.us/cwis](http://www.compass.state.pa.us/cwis) or by calling 1-800-932-0313.

Does anyone within my institution, school, facility or agency need to be notified after a report is made?
After making the report to ChildLine, mandated reporters are required to immediately thereafter notify the person in charge of the institution, school, facility or agency or the designated agent of the person in charge.

What else must be done after making a report to ChildLine?
If an oral report was made to ChildLine, a report of suspected child abuse (CY 47) must also be completed and forwarded to the county children and youth agency within 48 hours after making the report. This form can be obtained at [www.KeepKidsSafe.pa.gov](http://www.KeepKidsSafe.pa.gov) or from the children and youth agency. If a report is made electronically, no CY-47 is required to be completed.

Does a mandated reporter have to know for sure that the child was abused?
A mandated reporter is responsible to make the report when they suspect a child is a victim of abuse.

Are mandated reporters required to report when they learn of the abuse from someone other than the child who was allegedly abused?
Nothing requires a child to come before the mandated reporter in order to make a report.

Must a mandated reporter give their name?
The law requires that the mandated reporter identify themselves and where they can be reached. This information is helpful so that if clarification on the situation or additional information is needed, the children and youth caseworker can contact the mandated reporter.
Will the name of the mandated reporter be released?
The identity of the person making the report is kept confidential with the exception of being released to law enforcement officials or the district attorney's office.

What if a mandated reporter fails to follow the law?
The penalties for a mandated reporter who willfully fails to report child abuse range from a misdemeanor of second degree to a felony of the second degree.

Will a mandated reporter have to testify in court?
Mandated reporters may be required to testify in a civil or criminal court case, including a juvenile or criminal court proceeding.

What happens after a report is made?
ChildLine forwards the report of suspected child abuse to the local county children and youth agency, which investigates the report to determine if the allegations can be substantiated as child abuse/neglect and also arranges for or provides the services that are needed to prevent the further maltreatment of the child and to preserve the family unit.

The county children and youth agency must begin an investigation within 24 hours. A thorough inquiry is conducted to determine if the child was abused and what services are appropriate for the child and family. This must be completed within 30 days unless the agency provides justification as to why the investigation cannot be completed, including attempts being made to obtain medical records or interview subjects of the report.

If the alleged perpetrator named in the report does not meet the definition of perpetrator under the CPSL, but does suggest the need for investigation, ChildLine will forward the information to the district attorney's office in the respective county.

How does a mandated reporter learn what happened on the report they made and what the agency is doing to protect the child from further abuse?
Mandated reporters will receive information from the Department regarding the final status of the report, whether it was unfounded, indicated or founded, and the services planned or provided to protect the child.

What will be done for the child?
Pennsylvania is committed to advancing child protection policies and practices that, when possible, keep children safely in their own homes connected to nurturing and protective adults. Under Pennsylvania law, it is the responsibility of the county children and youth agency to investigate reports
of child abuse and neglect or assess a family for General Protective Services. County children and youth agencies, in partnership with families and community-based agencies, strive to provide services to prevent any further abuse of the child and to ensure the child's well-being and healthy development. The county agency and its partners work to strengthen the child's family toward breaking the cycle of abuse and to preserve the family, whenever possible. Should the child be found to be in danger of continued harm, the county agency may petition the court to have the child removed from the home with ongoing court monitoring to determine if the child can safely be reunited with his/her family.
Exhibit N

Photo Release Form

Trinity Christian United Church of Christ
2009 Church Road
Box 538, Skippack, PA  19474

Permission to Use Photographs

Subject:  Activities or Special Events associated with Trinity Christian United Church of Christ, Skippack, PA 19474, taking place on or off Trinity Christian United Church of Christ property.

I grant to Trinity Christian United Church of Christ Leaders the right to take photographs of my child in connection with church sponsored activities, its assigns and tranferees to copyright, use, and publish in print and/or electronically.

I grant that this permission extends to other churches that join with Trinity Christian United Church of Christ for activities and special events and that these churches may use such photographs of my child with or without identification for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, and Web content.

I have read and understood the above:

Child’s printed name _______________________________

Parent or Guardian’s name _______________________________

Address  __________________________________________________________

________________________________________________________

Date ___________________

Signature of Parent or Guardian (if child is under age 18) _________________________

This form is value for a given activity year, September 1 through August 31, during which it is signed. After that date, a new form will be requested.