



NEW EMPLOYEE/TRANSFER EMPLOYEE VERIFICATION FORM

NAME OF EMPLOYEE _____

PLACE OF EMPLOYMENT _____

Mark one box in each of the two columns below:

- | | |
|---|--|
| <input type="checkbox"/> Parish Employee
<input type="checkbox"/> School Employee (Teacher/Administrator/
Coach/Counselor)
<input type="checkbox"/> School Employee (All other school employees)
<input type="checkbox"/> Chancery employee | <input type="checkbox"/> New employee to the diocese
<input type="checkbox"/> Employee transfer (from/date) _____ / _____ |
|---|--|

HIRING CHECKLIST (insert date of completion)

_____ Employee application _____ Reference checks

BACKGROUND CHECK (insert date of completion for one that is required)

- _____ Basic Criminal background check (for parish employee/Chancery employee)
 _____ New School Employee Criminal background check (for school employee)
- Is DCS background check completed YES NO
 -If yes, note date of completion _____
 -If no, then note date of Superintendent's letter _____
- _____ National Sex Offender Public Website search (for employees who are minors (Under 18) in parishes and those in schools who do not have contact with younger children)

SAFE ENVIRONMENT TRAINING (insert date of completion of most recent training)

- _____ Initial EMPLOYEE Safe Environment Training Curriculum at the Catholic Mutual Group Learning Platform
 _____ Year 2 – Focus on Boundaries Safe Environment Training at the Catholic Mutual Group Learning Platform
 _____ Safe Environment Training Video & Employee Personnel Manual (only for employees who transfer employment and have not been required to complete CMG Connect training yet)
 _____ Code of Conduct for Youth Working with Younger Children

This form must be signed and submitted to the diocesan Business Office as part of the new hire packet. Keep all safe environment documents noted above on file in a secure location at the place of employment.

I verify that the above-named employee has completed the requirements of our diocesan Safe Environment Program including all requirements listed above.

 AUTHORIZED SIGNATURE (PARISH/SCHOOL SAFE ENVIRONMENT COORDINATOR)

 DATE

Diocesan SEC use only:

Reviewed by: _____ Date: _____

OK to pay: YES NO

Revised 3/4/2025

CSO staff use only:

Reviewed by: _____ Date: _____

OK to pay: YES NO

_____ Signed Authentic Witness Document