Safe Environment Training for Children and Youth
Verification Form

This is to verify that I have personally presented the designated Safe Environment Training, the VIRTUS: Teaching Safety – Empowering God’s Children® for my child
(name):___________________________________________ and (grade):__
on (date): ___________________________ in coordination with my Parish School of
Religion, (name of school or parish):__________________________.

This form is valid for one academic year.

This serves to verify that:
(please initial below)

____ I have presented the designated Safe Environment lesson to my child.

Please print clearly

Name of Parent or Guardian:___________________________________________

Signature:_________________________________________________________ Date:___________

Printed Name of DRE/CRE:____________________________________________

Signature of DRE/CRE:_________________________________________ Date:___________