

**St. Francis of Assisi Catholic Community
2008-2009 Safe Environment Program Training Renewal
Occupational Training Signature Form**

Name: _____

Email: _____

Occupational Training

Name of Class: _____

Date of Class: _____

Brief Description: (please provide a detailed class summary outlining one or more of the following:

- types of abuse covered
- prevention measures
- recognizing abuse
- responding to suspicions
- reporting requirements)

I understand that by completing the Occupation Training above, I have met the annual training requirements under our parish's Safe Environment Program. If there is anything I do not understand or if I have any questions about anything I was exposed to in the training option I chose, I will contact the Safety Officer at the church office **972-712-2645 ext. 228** or via email at gmllich@stfoafrisco.org for more information.

My Signature: _____

OFFICE USE ONLY:

Approval Signature: _____ *Date:* _____