

**SAFE CHURCH  
POLICIES AND PROCEDURES**

**Memorial Congregational Church  
(United Church of Christ)  
Sudbury, Massachusetts**

**March 2009**

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# **SAFE CHURCH POLICIES AND PROCEDURES**

## **Memorial Congregational Church (United Church of Christ) Sudbury, Massachusetts**

### **A INTRODUCTION**

#### **A.1 MISSION**

As stated in our covenant and reflected in our Constitution and By-Laws, we at Memorial Congregational Church (MCC) “unite for the worship of God and the service of humanity.” Every effort will be made to ensure that all who participate in our church life, including children, adults, and church workers, whether paid or volunteer, will be able to pursue these aims in an environment that is safe, secure, and nurturing.

#### **A.2 SCOPE OF POLICIES AND PROCEDURES**

The policies and procedures included in this document apply to all activities which take place within the building and properties of MCC, as well as programs, activities, or events scheduled as part of the ministry of this church which take place elsewhere. The policies and procedures apply to all members, friends, volunteers, or employees of the church.

#### **A.3 LOCATION OF POLICIES AND PROCEDURES**

Copies of the Safe Church Policies and Procedures will be kept in binders in three locations:

1. the Church Office;
2. the Christian Education resource area; and
3. the Church Library located in the parlor.

All forms referenced in this document are located in Section K.

## **B KEY POLICY**

1. Memorial Congregational Church will have an open door philosophy, meaning that all rooms are to be visible at all times.
2. Any person who seeks possession of a key to MCC will have a clearly stated reason for needing a key and will be approved by the Church Council if necessary.
3. A Key Registry will be maintained by the Trustees with the help of the church's Administrative Assistant.
4. Keys shall be returned when they are no longer needed by the holder, and the return will be documented.
5. Keys are not to be loaned to unauthorized persons, duplicated, or kept beyond the time that they are needed. Authorized key holders may loan their key to a spouse if the spouse has signed the Key Registry and a Statement of Compliance.
6. Key holders must sign the Key Registry and a Statement of Compliance.

## C SCREENING AND HIRING

### C.1 APPLICATIONS POLICY

Memorial Congregation Church welcomes volunteers who have been actively and regularly participating as members for at least six months or friends of the Church for at least one year and church staff to become involved with the various programs offered as part of the Youth Ministry.

### C.2 DEFINITIONS

**MCC, the Church:** Memorial Congregational Church of Sudbury.

**Authorized Volunteer:** Any person who offers or is recruited, has completed the appropriate and has been accepted by the appropriate supervisor, Board, or Committee at MCC to provide unpaid services. This may include people to whom keys have been assigned, Sunday School teachers, youth group leaders, or drivers for church-sponsored youth events.

**External candidate:** an applicant for a position, paid or volunteer, who is not a member of MCC, has not been actively and regularly participating as a member or friend of the Church for at least six months, or has never held a position at MCC previously.

**Staff or paid employee:** Any individual hired and compensated by MCC on a part-time, full-time, temporary, or permanent basis.

**Direct contact:** someone who has the immediate responsibility for the care of children or regular face to face interactions with children, such as Sunday School teachers, youth group leaders, youth choir directors, or nursery supervisors.

**CE:** Christian Education

**Criminal Offender Record Information (CORI):** Information regulated by the Criminal History Systems Board (CHSB) and maintained by the Board of Probation regarding criminal convictions of persons within the Massachusetts Court System.

**Certification:** A process by which an organization is granted legal access to CORI after a review of an application submitted by that organization to the Criminal History Systems Board.

**Agreement of Non-Disclosure (AOND):** A signed form, submitted by anyone who is certified to have access to CORI, in which they agree to certain terms of confidentiality.

**Safe Church Advocate:** A member of The Memorial Congregational Church of Sudbury who meets the requirements of an Authorized Volunteer, is appointed by and accountable to the Church Council, and has cleared a CORI check. The Council will maintain a list of qualified volunteers to serve as resources and support for the Safe Church Advocate and to be called upon as needed. The Safe Church Advocate will:

1. be a certified CORI officer and serve as the CORI Administrator,

2. coordinate implementation of the policies and procedures contained in this document,
3. receive and maintain a file of Incident Report Forms,
4. file Mandated Report Forms with the Department of Social Services.

### **C.3 APPLICATION PROCEDURES**

1. All candidates, whether external or internal, seeking paid employment at MCC; all paid staff; and all ordained staff, whether paid or not, will complete the following:
  - a. Application for Employment;
  - b. Signed Authorization for a CORI check; and
  - c. Signed Statement of Compliance.
2. All authorized volunteers working with youth and children as youth group leaders, or workers who will accompany youth on field trips outside MCC or supervise youth overnight as a regular part of their responsibilities, whether on or off MCC property will complete the following:
  - a. Signed Authorization for a CORI check; and
  - b. Signed Statement of Compliance.
3. All authorized volunteers serving as Sunday School teachers, substitute teachers, or any position that requires regular direct contact with youth will complete the following:
  - a. Signed Statement of Compliance.
4. Chaperones for overnight events or extended off-site will complete the following:
  - a. Signed Authorization for a CORI check; and
  - b. Signed Statement of Compliance.
5. All other chaperones and drivers for field trips will complete the following:
  - a. Signed Statement of Compliance.
6. All applications for paid employment or authorized volunteer positions will be reviewed by an appropriate supervisor, or Committee. Before assuming a paid or volunteer position, the applicant will be interviewed.
  - a. Gaps in time, irregular employment patterns, or unexplained absences noted on Application for Employment must be pursued with both former employers and potential employees.

- b. For candidates for paid positions, references will be contacted for information that may be helpful in determining the applicant's suitability for the position being sought.
- c. For candidates for volunteer positions, references may be contacted at the discretion of the supervisor or supervisory board or committee.
- d. Interviews will be conducted with those applicants who are deemed suitable following the review of the application and contact with previous employers and references.
- e. If the applicant is deemed suitable for the position being sought, a Criminal Offender Record Information (CORI) check will be conducted if required per sub-section C.4.

#### **C.4 CORI CHECK POLICY**

The Safe Church Advocate shall ensure that:

1. all appropriate applicants, in written form, have consented to a CORI investigation;
2. information received as a result of the CORI investigation is reviewed according to the criteria set forth in subsection C.5; and
3. information collected is held in confidence.

Upon receipt of the Authorization to Request CORI, the Safe Church Advocate will submit a request to the CHSB for investigation. If the CORI investigation determines that a criminal record exists, the Safe Church Advocate will review the information in accordance with the criteria set forth in this policy, and will consult with the Senior Minister if necessary. After such review, the Safe Church Advocate will make a decision regarding the personnel transaction at issue.

#### **C.5 POLICY FOR REVIEW OF CRIMINAL RECORDS**

The following criteria should be used by the Safe Church Advocate in conducting a review:

1. Anyone convicted of, or who admits to, committing Child / Elder Abuse, whether physical, emotional, or sexual, will not be considered, under any circumstances, for a position involving contact with children.
2. There will be a presumption that the applicant is ineligible for any position involving direct contact with children if the background check indicates a felony conviction for a crime which involves the use of force or violence, rape, indecent assault, battery, or the crime of attempting any of the aforementioned offenses; or illegally manufacturing, distributing, or dispensing any controlled substances or the crime of possession with intent to manufacture, distribute or dispense a controlled substance, or has been charged



with any felony listed above and is either awaiting trial or has been defaulted by the court.

3. The Safe Church Advocate may consider other factors as (s)he deems appropriate that bear on a candidate's suitability for a paid or volunteer position.

## **D YOUTH PROTECTION AND SUPERVISION**

### **D.1 YOUTH PROTECTION POLICY**

Memorial Congregational Church is committed to creating a safe and healthy environment in which young people can learn about and experience God's love. In order to ensure this, we will provide supervision for all activities and programs involving children and youth, and employ practices that provide for the safety of children, youth, and those who care for them.

### **D.2 YOUTH PROTECTION DEFINITIONS**

**Chaperone:** a volunteer who helps supervise youth for a special activity, such as a party or field trip. To be an approved chaperone, an individual must be :

- 1) a member of MCC for at least six months or have attended MCC regularly for at least one year; and
- 2) at least 21 years old and a minimum of five years older than the oldest youth participating in the activity.

**Helper, assistant:** a volunteer for regular youth activities, such as Sunday school and related activities or youth group, who functions in a non-supervisory role.

**Supervisor:** a paid or volunteer worker who has direct responsibility for the care of youth, such as a teacher, youth group leader, chaperone, or choir director.

**Field trip:** a youth event that is scheduled off MCC property, whether for in-town or out-of-town, one hour, one day, or overnight.

### **D.3 YOUTH PROTECTION PROCEDURES**

#### **D.3.1 Two adult rule**

No adult will be alone in the Church, or at a church approved activity, with a child(ren) that is not his or her own or a relative, without permission of the child(ren)'s parent(s). If a second adult cannot be located, the class or activity will be canceled, and the children will be returned to their parent(s) or guardian(s). It is permissible to have one adult per car with each car carrying a

group of young people on a field trip.

### **D.3.2 Five year older rule**

Classroom and nursery helpers, and youth group assistants must be five years older than the oldest participant in the class, group, or activity.

### **D.3.3 Medical Release Forms**

1. All youth participating in a youth group or going on a field trip with either a youth group or the Sunday School, must have a Medical Release Form (Section K) on file before their participation.
2. Form must be given to youth or parents/guardians to be completed and returned to the Director of Christian Education (or Church School Superintendent) for Sunday School events, or the Youth Ministry leader for youth group participation.
3. Completed form will be kept on file in the Senior Minister's office.
4. Each time a field trip or overnight event occurs, the original must be taken with an adult leader while a copy remains in the CE or YM office.

### **D.3.4 Field trip/youth event guidelines**

1. Youth Ministry /CE Approval: All field trips or events should receive the approval of the Youth Ministry / CE Committee before the activity can take place and before fundraising for the activity begins.
2. Approval of Chaperones: All chaperones for youth activities will be approved by Youth Ministry.
3. Parental Consent: Parents or guardians should be fully informed about programs, activities, leaders, chaperones, dates and times, cost, method of transportation, and purpose of the scheduled trip or activity. The appropriate signed Field Trip Consent Form (Section K) should be completed and returned before any child or youth can participate in the event.
4. Vehicle rules:
  - a. Drivers for field trips must be 25 years or older and have a copy of their driver's license and registration on file.
  - b. Anyone who has had their license revoked or suspended within the past five years will be ineligible to drive for youth activities.

- c. If it was revoked or suspended more than five years ago, the Youth Ministry Committee will make a decision as to suitability. All occupants of a vehicle will use a seat belt.
5. Appropriate supervision: The two adult rule applies for all church-related events. If the minimum level of supervision cannot be achieved, the activity must be cancelled; this may result in the loss of deposit fees for which the church cannot be responsible.
- a. Non-overnight activities on church property: 2 adults for each group.
  - b. Day trips off church property: a minimum of 2 adults (more, if the size of the group requires)
  - c. For overnight activities, at least 2 adults (more, if the size of the group requires), and there must be at least one adult of the same sex as the participants.

### **D.3.5 Discipline**

The purpose of discipline with youth is to maintain order in a manner consistent with the teaching of Christian responsibility, respect, and cooperation.

1. No youth will be disciplined by the use of any form of physical punishment.
2. Supervisors are encouraged to listen to the youth, and clearly communicate expectations of appropriate behavior.
3. If a child's behavior is disruptive, one of the adults in the classroom may leave to seek the DCE or the child's parent to come to the classroom.

### **D.3.6 Appropriate activities**

Activities that involve inappropriate physical contact are not suitable recreational activities.

## **E - SAFETY AND FIRST AID**

### **E.1 FIRE SAFETY PROCEDURES**

1. If your clothing catches fire, call for help and STOP, DROP, and ROLL.
2. If another person's clothing catches fire, call for help and try to get that person to STOP, DROP, and ROLL. Use heavy clothing, a rug or similar material to wrap the person and smother the flames.
3. If you discover a fire or smoke condition, or if the evacuation alarm sounds:
  - a. Immediately evacuate the adults and children in the room of origin, and the persons in other rooms.

- b. Do not attempt to extinguish the fire unless you believe it can be easily controlled with one of the fire extinguishers located at the exit doors and other locations in the corridors while others continue the evacuation process.
- c. Direct all persons from the sanctuary to the exit door from the Library end of the Parlor, all PF persons to the main entrance doors, and all church school wing persons to the exit door directly to the exterior at the end of the Church School Wing.
- d. Activate a manual pull station of the fire alarm system as you pass one of those devices unless the evacuation alarm is already sounding. (This activation will automatically call the Fire Department.)
- e. Take time to get outside clothing only if it is safe to do so.
- f. Lead all persons to the parking lot uphill from Ames Hall and away from the vehicle entrance to the parking lot. If conditions permit, have all persons move off the parking lot to the lawn next to the stockade fence.

## **E.2 STAFF TRAINING AND INSTRUCTIONS**

- 1. Become familiar with the posted “In case of Fire” procedures that are posted in each classroom in church school wing as well as the locations of the exits, the fire alarm pull stations, the fire extinguishers and the telephones.
- 2. Establish primary and secondary exits for the Sanctuary, the PF room, and the Church School wing.
- 3. Conduct emergency evacuation drills regularly. At least one drill will assume the primary exit is blocked such that the secondary exit must be used.

## **E.3 STAFF RESPONSIBILITIES IN CASE OF FIRE**

- 1. The Usher Captain will conduct a headcount to confirm all parishioners have safely exited the building. This person must confirm with CE Superintendents that all children have safely exited the church school wing.
- 2. The Usher Captain will check the sanctuary, parlor, classrooms, and bathrooms. Also close all doors.
- 3. The Ushers will assist any parishioners requiring assistance, and a CE Committee member or Superintendent will assist the crib room attendant in evacuating the crib room children.
- 4. When the Usher Captain is free of other evacuation duties and it is safe to do so, he/she will use a cell phone to call the fire department (911) and report the location of the fire (if known) and the status of the evacuation.
- 5. When an adult is free of other evacuation duties, send that person to the Church Street side of the Church to report the location of the fire (if known), the status of the evacuation and the possible location(s) of any person(s) not accounted for to the Fire Department Incident Commander.

6. Keep all evacuees far from the building on the parking lot or lawn uphill from Ames Hall and far from fire apparatus until advised by the Fire Department Incident Commander that it is safe to return to the building.
7. In the event of a severe wind storm or tornado, all persons in the sanctuary should move to the lower lobby (outside Lisa's office) and the lower elevator door area. All children from the church school wing should leave their classrooms and move to the church school wing corridor.

## **F SUSPECTED CHILD / ELDER ABUSE**

### **F.1 REPORTING AND RESPONSE POLICY**

Allegations of Child / Elder Abuse will be promptly reported to the Safe Church Advocate. If there is a reasonable cause to believe that Child / Elder Abuse has occurred, the Safe Church Advocate or Senior Minister will notify the Department of Social Services (DSS) in the manner described in section F.3. Members of the church community, including volunteers working in youth ministry, are morally obligated to report reasonable suspicions of Child / Elder Abuse.

All allegations will be investigated with due respect for the dignity and privacy of everyone involved. Activities related to the handling of complaints or incidents will be documented, and documents will be maintained in a locked file cabinet in the Senior Minister's office. When necessary, full cooperation will be given to civil authorities under the guidance of the church's attorney.

### **F.2 DEFINITIONS**

**Child:** a person under the age of eighteen as defined by the Commonwealth of Massachusetts.

**Mandated Reporter:** a person who, by virtue of their profession or position, is required by law to report all reasonable suspicions of Child / Elder Abuse. As of 5/3/2002, the law applies to three categories of church personnel:

1. clergy (including licensed or commissioned ministers);
2. anyone performing duties on behalf of the church in the role of a pastor (including deacons who serve communion, lay ministers, etc.); and
3. a select group of church employees and volunteers, such as those who supervise, educate, coach, train or counsel children on a regular basis.

Because of the vulnerability of children, their right to our protection supersedes a counselee's right to confidentiality.

Mandated reporters at MCC are:

1. Senior Minister and Associate Minister;
2. CE Superintendents;
3. Director of Music (if involvement with youth); and
4. Diaconate nominee

**Incident Report:** a written report that contains all the information necessary to complete a Mandated Report. The Incident Report must be submitted, within 24 hours of making an oral report to the Safe Church Advocate, by anyone with reasonable cause to suspect Child / Elder Abuse.

**Mandated report:** a written report that must be submitted to the Department of Social Services within 48 hours of making an oral report of abuse.

## **F.3 REPORTING SUSPECTED CHILD / ELDER ABUSE**

### **F.3.1 Ensure the child's safety**

1. Call an ambulance if the injury is severe.
2. Make a reasonable attempt to inform the Safe Church Advocate who will inform the parent(s). If the Safe Church Advocate is not available, contact the Senior Minister who will inform the parents.

### **F.3.2 Oral reports**

1. The Safe Church Advocate should be informed immediately, either by the person initially reporting the incident, or by their designee, such as the Senior Minister or CE Superintendent.
2. The Safe Church Advocate will make an oral report to DSS by means of a phone call if there is a reasonable cause to believe that Child / Elder Abuse has occurred.

### **F.3.3 Incident Report**

1. An Incident Report must be submitted to the Safe Church Advocate by the person initially reporting the incident, or by their designee, such as the Senior Minister or CE Superintendent within 24 hours of the oral report:
  - a. the Safe Church Advocate will assist in the completion of the Incident Report.
  - b. an Incident Report must be submitted even if it is determined that a mandated report is not necessary.
  - c. Incident Reports are required for all unusual occurrences.

### **F.3.4 Mandated Report**

1. If there is a reasonable cause to believe that Child / Elder Abuse has occurred, the Safe Church Advocate or Senior Minister shall submit a Mandated Report to DSS within 48 hours of the oral report to DSS:
  - a. No one is PROHIBITED from making a report directly to the DSS, and may do so if they wish. An immediate report to the Safe Church Advocate is still required.
  - b. However, in order to avoid duplicate reports and ensure that proper procedures are followed, it is recommended that official reporters, such as the Safe Church Advocate, Senior Minister, or CE Superintendent, be designated within the church. The person originally reporting the incident will not be identified on the Mandated Report.
2. After reviewing the Incident Report, it may be determined that there is not reasonable cause to contact DSS and file a Mandated Report. This determination must be documented in writing and filed with the Incident Report. If the original reporter disagrees, that person may contact DSS directly; they will be assisted as needed in completing the Mandated Report and will be identified as the reporter.

### **F.3.5 Follow-up**

1. The accused will immediately be removed from all contact with children. Paid employees will be suspended with pay or have their ministry restricted to exclude contact with children. Both volunteers and paid staff should be given the recommendation to obtain their own lawyer.
2. The Senior Minister or Safe Church Advocate will inform the child's parent(s) or guardian(s) (if they were not the ones accused) of the concern, whether or not a report is filed with DSS.

## **F.4 RESPONSE FOLLOWING A MANDATED REPORT**

The response following a report of alleged Child / Elder Abuse, including contact with the church's attorney, will be coordinated by the Safe Church Advocate.

If there is an allegation against pastoral staff, a church deacon, designated by the chairman of the Diaconate, will contact the Area Minister.

#### **F.4.1 Investigation**

1. The extent to which information will be shared with the congregation will be determined by the Council President and others as appropriate. The input of the Area Minister will be sought and, if pastoral staff is involved, the Church Council may be consulted in making this decision.
2. All necessary parties will cooperate with the investigations made by DSS and the police.
3. If necessary, the Council will appoint a liaison to be the designated contact with the media.

#### **F.4.2 Continuing the ministry of the Church**

1. Pastoral support will be offered to all parties involved, including those who have made the complaint, the accused, the families of both, and the congregation. Decisions about how this support will be given will be made by pastoral staff and the Diaconate.
2. If the allegations involve pastoral staff, the ministry of the church will need to be maintained while the issue is being addressed. Decisions regarding how this will be accomplished will be made by the Diaconate with assistance from the Area Minister.

#### **F.4.3 Documentation**

All information obtained during the investigation, all activities related to the issue being addressed, and all findings are to be carefully documented and signed, including dates, times, and locations of all activities and meetings; the names of the parties present; any decisions or conclusions made; and any further action to be taken. This documentation is to be retained in a locked file cabinet in the Senior Minister's office.

## **G ADULT CONDUCT**

### **G.1 PROHIBITION OF SEXUAL EXPLOITATION AND HARASSMENT**

MCC wishes to create and maintain a community in which members, friends, staff, and volunteers can worship and work together in an atmosphere free of all forms of discrimination, harassment, exploitation, or intimidation. The Church is strongly opposed to sexual exploitation and harassment of any kind, and such behavior is prohibited by church policy. Unhealthy activities such as smoking, irresponsible drinking of alcohol, use of illegal drugs, and improper language are not appropriate. No drinking of alcohol is permitted by adults at church sponsored events where youth are involved. Activities that involve inappropriate physical or intimate



contact are not suitable recreational activities. All employees, members, and friends of MCC are responsible for ensuring that their behavior is free of sexual misconduct and harassment. It is the intention of the church to respond to allegations of behavior that are contrary to this policy and, if necessary, to discipline those persons who violate it.

## G2 POLICY ON MINISTERIAL CONDUCT

All persons engaged in the ministry of MCC (including elected or appointed leaders, employees, volunteers, and authorized ministers) are responsible for knowing the possible impact of their words and actions in ministering to the emotional, mental, and spiritual needs of persons who come to them for help or over whom they have any kind of authority. Sexual exploitation of parishioner(s) or other individual(s) by anyone engaged in the ministry of MCC is unethical and unprofessional behavior and will not be tolerated within this congregation.

### G.3 DEFINITIONS

**Minister:** a person engaged by the church to carry out its ministry. For the purposes of this document, a minister includes elected or appointed leaders of the church, commissioned ministers, employees, and authorized ministers. This does not include substitute or one-time only participants, such as visiting musicians or speakers.

**Authorized minister:** a person who holds ordained ministerial standing or has been commissioned or licensed by an association of the United Church of Christ. This does not include substitute pulpit supply.

**Church member:** a person who has formally joined MCC by confirmation, profession of faith, transfer of membership from another church, or reaffirmation of faith.

**Associate member, friend of the church:** a person who has not formally joined MCC, but attends regularly and contributes to the support of the Church.

**Ministerial relationship:** the relationship between one who carries out the ministry of the church and the one being served by that ministry.

**Sexual exploitation:** activity or conduct of a sexual nature in which a minister or anyone in a position of power (e.g., an influential Church member) engaged in the work of the Church takes advantage of the vulnerability of a participant by causing or allowing the participant to engage in sexual behavior with the person in power.

**Harassment:** repeated misconduct, whether verbal or physical, that creates an environment that is uncomfortable, unwelcoming, discriminating, or intimidating, or leads to an atmosphere in which a person's ability to participate in worship and activities at the church is compromised.

**Sexual harassment:** repeated or coercive sexual advances toward another person contrary to his or her wishes. It includes behavior directed at another person's sexuality or sexual orientation

with the intent of intimidating, humiliating, or embarrassing the other person, or subjecting the person to public discrimination.

## **H COMPLAINTS OF MISCONDUCT**

### **H.1 INFORMAL MEASURES**

1. The complainant(s) has the option to resolve complaints using informal measures.
  - a. The complainant can attempt to resolve the matter directly with the individual(s) accused of sexual exploitation or harassment.
  - b. The complainant can report the incident(s) to the Senior Minister of the church or their immediate supervisor in an effort to resolve the matter informally.

### **H.2 FORMAL MEASURES**

1. If an informal resolution of the complaint(s) does not seem appropriate or does not succeed, formal proceedings may be instituted. The Safe Church Advocate will be informed of all formal complaints, and the complainant(s) may request of the Safe Church Advocate that s/he initiate an investigation, using the following procedure:
  - a. Gather statements from individuals involved and anyone else with pertinent information.
  - b. Consider all information and make a determination of findings.
  - c. Findings that the complaint is verified may result in recommendations to Council for action, such as:
    - Formal reprimand with defined expectations for changed behavior, including possible public notification
    - Recommending or requiring a program of growth that may include education and/or counseling;
    - Probation, with the terms of the probation clearly identified;
    - Dismissal from employment or volunteer leadership position, and, in extreme cases, affiliation with, or membership in, the Church.
  - d. Finding that no sexual exploitation or harassment has occurred should be expressed to both the employee or volunteer and the complainant. Report these findings to the employee's or volunteer's supervisor or supervisory committee.

- e. If the accused employee or volunteer is an authorized minister, the chairman of the Diaconate will inform the Area Minister or Association Committee on the Ministry, of the allegation. MCC will cooperate fully in any procedures of the UCC related to the person's ministerial authorization while retaining the right and the responsibility to employ or designate leadership within MCC as it determines best.

### **H.3 APPEAL**

If the complainant(s) or accused person(s) is not satisfied with the disposition of the matter, he or she has the right to appeal to the Council who will appoint a committee to review the complaint.

### **H.4 DOCUMENTATION**

All information obtained during the investigation, all activities related to the issue being addressed, and all findings are to be carefully documented and signed, including dates, times, and locations of all activities and meetings; the names of the parties present; any decisions or conclusions made; and any further action to be taken. This documentation is to be retained in a secure location determined by the Safe Church Advocate.

## **I TRAINING AND EDUCATION**

### **I.1 POLICY ON EDUCATION AND TRAINING**

Every effort will be made to train all employees, mandated reporters, and volunteers as deemed appropriate regarding the Safe Church Policies and Procedures. Mandated reporters, as well as staff and volunteers who have regular direct contact with youth should also receive education about Child / Elder Abuse awareness. Anyone who will have regular contact with children in our church and anyone who will have possession of a key to the Church will read and sign a Statement of Compliance.

### **I.2 PROCEDURES FOR EDUCATION AND TRAINING**

1. Training will be offered at the beginning of each church school year, and at the start of employment for paid staff. It will be considered a mandatory part of volunteer training and employee orientation.
2. If substantial changes or additions are made to the Safe Church Policy training will be provided.
3. The church's Administrative Assistant will maintain a record of who has received

training.

4. Training will include the use of MACUCC training materials (which include a video regarding Child / Elder Abuse and safe church policies in general), a review of policies and procedures that are specific to MCC and pertinent to the work in which the employee or volunteer will be involved, and instruction in the use and completion of the various forms.

# J APPENDIX

## Report Child Abuse

To report possible child abuse or neglect in Massachusetts, **you must first file an oral report by calling the Child-at-Risk Hotline at 1-800-792-5200** to notify the appropriate area office of the Department of Children and Families (DCF). Even if you complete the 51A Report Form located below, you must also first phone DCF directly or the Child-at-Risk Hotline. For information on how to report child abuse and neglect outside of Massachusetts, please call the National Child Abuse Hotline, 1-800-4-A-CHILD.

DCF relies on reports from professionals and other concerned individuals to learn about children who may need protection. DCF receives reports on more than 100,000 children each year. Certain professionals are mandated to report child abuse and neglect (listed below); however, anyone can report child abuse and neglect. If you learn that a child has been abused or neglected, or if you are concerned that a child may be in danger of abuse and neglect, **please first call DCF and file an oral report immediately - before you mail or fax the 51A Report Form (located below)**. Qualified professionals are available 24 hours a day to take reports and address your concerns.

When you call DCF to report child abuse and neglect, please do your best to provide the following information:

- The name, address, sex, date of birth or approximate age, present whereabouts of the reported child or children, and any other children in the household;
- The names, addresses and telephone numbers of the child's parents or other persons responsible for the child's care;
- The primary language spoken by the child and the child's caretaker;
- If you are a mandated reporter: your name, address, telephone number, profession and relationship to the child;
- if you are a non-mandated reporter: your name, address, telephone number, profession and relationship to the child; or you may remain anonymous;
- The nature and extent of the abuse or neglect;
- Any evidence or knowledge of prior injury, abuse, maltreatment or neglect;
- Your opinion of current risk to the reported child and to any other child in the home or substitute care setting;
- If the above information was given to you by a third party, the identity of that person, unless the third party has requested anonymity;
- The circumstances under which you first became aware of the child's alleged injuries, abuse or neglect;
- Any action taken to treat, shelter or assist the child; and
- Any additional information you believe may be helpful in establishing the cause of the child's injury or the person responsible.

**Form:**

- [Report of Child\(ren\) Alleged to be Suffering from Serious Physical or Emotional Injury by Abuse or Neglect \(PDF\)](#) | [RTF](#)

# Mandated Reporters

Massachusetts law requires many professionals who work with children to notify DCF if they suspect that any child has been, or is at risk of being, abused or neglected.

Massachusetts law defines the following professionals as mandated reporters:

- Physicians, medical interns, hospital personnel engaged in the examination, care or treatment of persons, medical examiners;
- Psychologists, emergency medical technicians, dentists, nurses, chiropractors, podiatrists, optometrists, osteopaths;
- Public or private schoolteachers, educational administrators, guidance or family counselors;
- Office of Child Care Services licensors;
- Day care and child care workers, including any person paid to care for, or work with, a child in any public or private facility, or home or program funded or licensed by the Commonwealth, which provides day care or residential services. This includes child care resource and referral agencies, as well as voucher management agencies, family day care and child care food programs;
- Social workers, foster parents, probation officers, clerks magistrate of the district courts, and parole officers;
- Firefighters or police officers;
- School attendance officers, allied mental health and licensed human services professionals;
- Psychiatrists, and clinical social workers, drug and alcoholism counselors; and
- Priests, rabbis, clergy members, ordained or licensed ministers, leaders of any church or religious body, accredited Christian Science practitioners, or a person employed by a church or religious body to supervise, educate, teach, train or counsel a child on a regular basis.

Mandated reporters who are staff members of medical or other public or private institutions, schools or facilities, must either notify the Department directly or notify the person in charge of the institution, school or facility, or his/her designee, who then becomes responsible for filing the report. Should the designee/person in charge advise against filing, the staff member retains the right to contact DCF directly.

Massachusetts law requires mandated reporters to **immediately make an oral report to the Department of Children and Families (DCF)** when, in their professional capacity, they have reasonable cause to believe that a child under the age of 18 years is suffering from abuse or neglect. You should report any physical or emotional injury resulting from abuse, including sexual abuse; or any indication of neglect, including malnutrition; or any instance in which a child is determined to be physically dependent upon an addictive drug at birth.

**After you file an oral report with DCF, a written report must be submitted to DCF within 48 hours after the oral report has been filed.** Please note that any mandated reporter who fails to file required oral and written reports can be punished by a fine of up to \$1,000.00.

During the screening and investigation of a 51A Report, any mandated reporter who has information that she believes might aid the Department in determining whether a child has been abused or neglected shall, upon request by DCF, disclose the relevant information to the Department. Under the law, mandated reporters are protected from liability in any civil or criminal action, and from any discriminatory or retaliatory actions by an employer.

**Mandated Reporters Guides:**

- [Mandated Reporters Guide - English \(PDF\)](#) | [Word](#)
- [Mandated Reporters Guide - Spanish \(PDF\)](#) | [Word](#)

References to Massachusetts Law are citations from Chapter 119, sections 51A-E.

## **Child Abuse and Neglect Reporting**

### **A Guide for Mandated Reporters**

#### **Introduction**

Under Massachusetts law, the Department of Social Services (DSS) is the state agency that receives all reports of suspected abuse or neglect of children under the age of 18. State law requires professionals whose work brings them in contact with children to notify DSS if they suspect that a child has been – or is at risk of being – abused or neglected. DSS depends on reports from professionals and other concerned individuals to learn about children who may need protection. The Department receives reports on more than 100,000 children each year.

The Department's primary mission is to protect children who have been abused or neglected in a family setting. DSS seeks to ensure that each child has a safe, nurturing, permanent home. The Department also provides a range of preventive services to support and strengthen families with children at risk of abuse or neglect.

References to Massachusetts law in this Guide are citations from Chapter 119, sections 51A-E.

#### **Who is a mandated reporter?**

Massachusetts law defines the following professionals as mandated reporters:

- physicians, medical interns, hospital personnel engaged in the examination, care or treatment of persons, medical examiners,
- -psychologists, emergency medical technicians, dentists, nurses, chiropractors, podiatrists, optometrists, osteopaths,
- public or private schoolteachers,
- educational administrators, guidance or family counselors,
- day care and child care workers, including any person paid to care for, or work with, a child in any public or private facility, or home or program funded or licensed by the Commonwealth, which provides day care or residential services. This includes child care resource and referral agencies, as well as voucher management agencies, family day care and child care food programs,
- -probation officers, clerks magistrate of the district courts, parole officers,
- social workers,
- foster parents,
- firefighters or police officers,
- Office of Child Care Services licensors,
- -school attendance officers, allied mental health and licensed human services professionals,
- drug and alcoholism counselors,
- psychiatrists, and clinical social workers.

Mandated Reporters who are staff members of medical or other public or private institutions, schools or facilities, must either notify the Department directly or notify the person in charge of the institution, school or facility, or his/her designee, who then becomes responsible for filing the report. Should the person in charge/designee advise against filing, the staff member retains the right to contact DSS directly.

#### **As a mandated reporter, what are my responsibilities?**

Massachusetts law requires mandated reporters to immediately make an oral report to the Department of Social Services when, in their professional capacity, they have reasonable cause to believe that a child under the age of 18 years is suffering from abuse or neglect. You should report any physical or emotional injury resulting from abuse, including sexual abuse; or any indication of neglect, including malnutrition; or any instance in which a child is determined to be physically dependent upon an addictive drug at birth.

A written report must be submitted to DSS within 48 hours after the oral report has been made. Please note that any mandated reporter who fails to make required oral and written reports can be punished by a fine of up to \$1,000.



During the screening and investigation of a 51A report, any mandated reporter who has information which he/she believes might aid the Department in determining whether a child has been abused or neglected shall, upon request by DSS, disclose the relevant information to the Department. Under the law, mandated reporters are protected from liability in any civil or criminal action and from any discriminatory or retaliatory actions by an employer.

### **Who is a caretaker?**

A "Caretaker" can be a child's parent, step-parent, guardian, or any household member entrusted with the responsibility for a child's health or welfare. In addition, any other person entrusted with the responsibility for a child's health or welfare, both in and out of the child's home, regardless of age, is considered a caretaker. Examples may include relatives from outside the home, teachers or school staff in a school setting, workers at day care and child care centers (including babysitters), foster parents, staff at a group care facility, or persons charged with caring for children in any other comparable setting.

### **How are abuse and neglect defined?**

Under the Department of Social Services regulations (110 CMR, section 2.00):

**Abuse means:** The non-accidental commission of any act by a caretaker upon a child under age 18 which causes, or creates a substantial risk of, physical or emotional injury; or constitutes a sexual offense under the laws of the Commonwealth; or any sexual contact between a caretaker and a child under the care of that individual. This definition is not dependent upon location (i.e., abuse can occur while the child is in an out-of-home or in-home setting).

**Neglect means:** Failure by a caretaker, either deliberately or through negligence or inability, to take those actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, emotional stability and growth, or other essential care; provided, however, that such inability is not due solely to inadequate economic resources or solely to the existence of a handicapping condition. This definition is not dependent upon location (i.e., neglect can occur while the child is in an out-of-home or in-home setting).

**Physical Injury means:** Death; or fracture of a bone, a subdural hematoma, burns, impairment of any organ, and any other such nontrivial injury; or soft tissue swelling or skin bruising, depending upon such factors as the child's age, circumstances under which the injury occurred and the number and location of bruises; or addiction to a drug or drugs at birth; or failure to thrive.

**Emotional Injury means:** An impairment to or disorder of the intellectual or psychological capacity of a child as evidenced by observable and substantial reduction in the child's ability to function within a normal range of performance and behavior.

### **How do I make a report of suspected child abuse or neglect? When must I file it?**

When you suspect that a child is being abused or neglected, you should immediately **telephone the DSS Area Office** serving the child's residence and ask for the Protective Screening Unit. You will find a directory of the DSS Area Offices at the back of this Guide. Offices are staffed between 9 a.m. and 5 p.m. weekdays. To make a report at any other time, including after 5 p.m. and on weekends and holidays, please call the **Child-At-Risk Hotline at 1-800-792-5200**.

As a mandated reporter you are also required by law to mail or fax a written report to the Department within 48 hours after making the oral report. The form for filing this report can be obtained from your local DSS Area Office.

Your report should include:

- All identifying information you have about the child and parent or other caretaker, if known;
- The nature and extent of the suspected abuse or neglect, including any evidence or knowledge of prior injury, abuse, maltreatment, or neglect;
- The circumstances under which you first became aware of the child's injuries, abuse, maltreatment or neglect;
- What action, if any, has been taken thus far to treat, shelter, or otherwise assist the child;
- Any other information you believe might be helpful in establishing the cause of the injury and/or person responsible.

Hospital personnel should take photographs of any trauma that is visible on the child and mail or deliver the photographs to DSS with the written report.

As a mandated reporter, you are required by law to also provide DSS with your name, address and telephone number.

We recommend that you inform the family that you have referred them to DSS for help, but do not do so if you think it would increase the risk to the child.

If you have any questions about whether or not to report a situation, please do not hesitate to contact your local DSS Area Office.

### **What happens after DSS receives a report of suspected child abuse or neglect?**

There are several possibilities, depending on the allegations reported and other case-specific circumstances:

If the Department determines there is reasonable cause to believe that a child has been abused or neglected, a social worker is assigned to investigate the report. The investigation, called a 51B, includes a home visit during which the social worker meets and talks with the child and the care-taker. If DSS determines that the situation is an emergency, the investigation is completed within 24 hours after the report is designated as an emergency. Investigations of all other reports are completed within 10 days.

If the Department determines that there is reasonable cause to believe that an incident of abuse or neglect by a caretaker did occur, the report is **supported** and the Department provides the family with services to reduce the risk of harm to the child. If the report is **unsupported** but the family appears to be in need of services, the Department may offer the family services on a voluntary basis. DSS will notify the mandated reporter, in writing, of its decision.

### **Referrals to the District Attorney**

It is important to note that if the Department determines a child has been sexually abused or sexually exploited, has suffered serious physical abuse or injury, or has died as a result of abuse or neglect, DSS must notify the District Attorney, who has the authority to file criminal charges, as well as local law enforcement authorities for the county where the child resides and where the offense occurred.

### **Where can I obtain more information about child abuse and neglect?**

You can obtain more information about child abuse and neglect by calling the **Massachusetts Department of Social Services Library at 617-748-2373**.

### **Other Useful Numbers**

The Department has an **Ombudsman's Office**, available from 8:45 a.m. to 5:00 p.m. each work day, to assist you. Please call **617-748-2444**.

**Child-At-Risk Hotline**  
**Foster/Adoptive Care Recruitment Line**  
**Kid's Net Connections**

1-800-792-5200  
1-800-KIDS-508  
1-800-486-3730  
(Foster/Adoptive Helpline)  
[www.magnet.state.ma.us/dss](http://www.magnet.state.ma.us/dss)  
1-800-632-8188  
[www.pcsonline.org/helplines](http://www.pcsonline.org/helplines)

**DSS Website**  
**Parental Stress Line**

**DSS Area Office Directory** Please ask for the Protective Screening Unit

**WEST**

Pittsfield	413-236-1800
Greenfield	413-775-5000
Holyoke	413-493-2600
Robert Van Wart Center	413-205-0500
East Springfield/Springfield	413-452-3200

**CENTRAL**

Leominster	978-466-1500
Whitinsville	508-234-1000
Worcester	508-929-2000

**NORTHEAST**

Lowell	978-275-6800
Lawrence	978-557-2500
Haverhill	978-469-8800
Cape Ann, Salem	978-825-3800
Lynn	781-477-1600

**METRO**

Malden	781-388-7100
Framingham	508-424-0100
Cambridge/Somerville	617-520-8700
Arlington	781-641-8500
South Weymouth	781-682-0800

**SOUTHEAST**

Attleboro	508-431-9500
Brockton	508-894-3700
Fall River	508-235-9800
New Bedford	508-910-1000
Cape & Islands	508-760-0200
Plymouth	508-732-6200

**BOSTON**

Hyde Park	617-360-2500
Dimock Street, Roxbury	617-989-2800
Park Street	617-822-4700
Chelsea	617-660-3400

## K SOURCES

*General Laws of Massachusetts*, Part I, Title II, Chapter 6: “Criminal Systems History Board,” Section 172: Dissemination of record information; certification; eligibility for access; scope of inquiry; access limited; use of information, Section 177: Violations; civil liability, and Section 178: Violations; punishment. <http://www.state.ma.us/legis/laws/mgl/6-172.htm> [177, 178]

*General Laws of Massachusetts*, Part I, Title XV, Chapter 94C: “Controlled Substances Act,” Section 31: Classes of controlled substances; establishment of criminal penalties for violations of this chapter. <http://www.state.ma.us/legis/laws/mgl/94C-31.htm>

*General Laws of Massachusetts*, Part I, Title XVII, Chapter 119: “Protection and Care of Children, and Proceedings Against Them,” Section 51A: Injured children reports. <http://www.state.ma.us/legis/laws/mgl/119-51A.htm>

“The Local Church and Sexual Abuse” produced by The Commission for Educational Ministries and The Commission for Mission, Development and Social Responsibility, Massachusetts Conference of the United Church of Christ, One Badger Road, Framingham, MA 01702, 1999.

“Making Our Churches Safe For All: Abuse Prevention Resources for Local Churches,” produced by the Conferences of the United Church of Christ Insurance Board, The Office for Church Life and Leadership, and The United Church Board for Homeland Ministries, 700 Prospect Avenue, Cleveland, OH 44115, 1999.

*Resources for Youth Ministry*, Commission for Educational Ministries, Massachusetts Conference United Church of Christ, One Badger Road, Framingham, MA 01702, 2001.

“Safety Tips on a Sensitive Subject: Child Sexual Abuse,” Church Mutual Insurance Company, 3000 Schuster Lane, Merrill, Wisconsin 54452, 1989.

“Special Issue: Child / Elder Abuse Prevention,” *Massachusetts Conference Christian Educators' Newsletter*, May 2002.

Taylor, Nancy S. “Message From the Minister & President: Mandated Reporters,” *United Church News*, Massachusetts Conference Edition, May, 2002.

Taylor, Nancy S. “Message From the Minister & President: Pastors need to communicate about limits of confidentiality,” *United Church News*, Massachusetts Conference Edition, June, 2002.

## **L FORMS**

Incident Report Form

Mandated Report Form

Statement of Compliance

Statement of Compliance for Outside Organizations

In-Town Field Trip Consent Form

Overnight/ Out-of-Town/Special Activity Consent Form

CORI Request Form

Medical Release Form

Application for Employment

Key Policy for Members of Memorial Congregational Church

Key Policy for Tenants of Memorial Congregational Church

Key Registry – Members Memorial Congregational Church

Key Registry – Tenant Memorial Congregational Church

Please note that CORI Request Form **MUST** go on Church letterhead.

**MEMORIAL CONGREGATIONAL CHURCH**

**United Church of Christ**

26 Concord Road

Sudbury, MA 01776

Phone 978-443-3885

[mccsudma@earthlink.net](mailto:mccsudma@earthlink.net)

**INCIDENT REPORT FORM**

This form is to be used to register **all** reasonable suspicions of Child / Elder Abuse, mistreatment, or neglect, whether occurring as part of a church program or not. Any unusual incident must be reported to the Safe Church Advocate immediately. That person (or his/her designee) will assist you in completing this form, which must be submitted within 24 hours of the oral report. The name of the Safe Church Advocate can be found in the church office, or CE office in the *Safe Church Policies and Procedures* binder.

Name of individual being reported \_\_\_\_\_  Male  Female

Home address \_\_\_\_\_

No. & Street

City State Zip Code

Home telephone number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of reporter \_\_\_\_\_

Home address \_\_\_\_\_

No. & Street

City State Zip Code

Home telephone number \_\_\_\_\_ Work phone Number \_\_\_\_\_

Briefly describe the nature and extent of the injury, accident or suspected abuse. Include specifics such as date, time, and location. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe the circumstances under which you became aware of the incident. Include the names of witnesses. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Indicate action taken by staff and/or volunteers immediately upon becoming aware of the incident. \_\_\_\_\_

\_\_\_\_\_

Please give any other information that you think might be helpful in establishing the cause of the incident(s) and/or the person(s) responsible for it. If known, please provide the name(s) of the alleged perpetrator(s). \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To whom was this incident reported? \_\_\_\_\_

Signature of reporter \_\_\_\_\_ Date \_\_\_\_\_

Role/function/position or reporter \_\_\_\_\_

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**For Office Use Only**

Report received by \_\_\_\_\_ Date received \_\_\_\_\_

\_\_\_\_\_ Copy submitted to parents/guardians (if individual is under eighteen years of age).

Submitted by \_\_\_\_\_ Date submitted \_\_\_\_\_

\_\_\_\_\_ Copy submitted to original reporter.

Submitted by \_\_\_\_\_ Date submitted \_\_\_\_\_

Action taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Was a report made to DSS? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, then;

Date and time of oral report \_\_\_\_\_

Date and time written report sent \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**MANDATED REPORT FORM**

Massachusetts law requires an individual who is a mandated reporter to immediately report any allegation of serious physical or emotional injury resulting from abuse, mistreatment, or neglect to the Department of Social Services by oral communication. This written report must then be completed **within 48 hours** of making the oral report and should be sent to the appropriate Department office.

Please complete all sections of this form. If some data is unknown, please signify. If some data is uncertain, place a question mark after the entry.

**DATA ON CHILD(REN) REPORTED:**

<b>Name(s)</b>	<b>Current Location/Address</b>	<b>Sex</b>	<b>Age/DOB</b>
1.			
2.			
3.			

**DATA ON MALE PARENT/GUARDIAN:**

Name \_\_\_\_\_

Last	First	Middle
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Address \_\_\_\_\_

Number	&	Street	City	State	Zip Code
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Telephone Number \_\_\_\_\_ Age \_\_\_\_\_

**DATA ON FEMALE PARENT/GUARDIAN:**

Name \_\_\_\_\_

Last	First	Middle
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Address \_\_\_\_\_

Number	&	Street	City	State	Zip Code
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Telephone Number \_\_\_\_\_ Age \_\_\_\_\_



**DATA ON REPORTER/REPORT:**

Date of Report \_\_\_\_\_ Mandatory Report \_\_\_\_\_ Voluntary Report

Reporter's Name: \_\_\_\_\_

Last

First

Middle

Reporter's address: (If the reporter represents an institution, school, or facility, please indicate)

Institution, school, facility name \_\_\_\_\_

Address \_\_\_\_\_

Number & Street

City

State

Zip Code

Reporter's Telephone number(s) \_\_\_\_\_

Has the reporter informed the caretaker of the report? \_\_\_\_\_ Yes \_\_\_\_\_ No

What is the nature and extent of the injury, abuse, mistreatment, or neglect, including prior evidence of same? (Please cite the source of this information if not observed first hand.) \_\_\_\_\_

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What are the circumstances under which the reporter became aware of the injuries, abuse, mistreatment or neglect? \_\_\_\_\_

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What action has been taken thus far to treat, shelter, or otherwise assist the child to deal with this situation? \_\_\_\_\_

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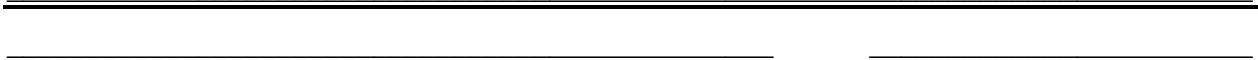
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Please give other information which you think might be helpful in establishing the cause of the injury and/or the person responsible for it. If known, please provide the name(s) of the alleged perpetrator(s). \_\_\_\_\_

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Signature of Reporter

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Date

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26 Concord Road

Sudbury, MA 01776

Phone 978-443-3885

[mccsudma@earthlink.net](mailto:mccsudma@earthlink.net)

**STATEMENT OF COMPLIANCE**

I acknowledge that I have read and understand the *Safe Church Policies and Procedures Executive Summary* and agree to comply with all conditions set forth in that document in my activities at Memorial Congregational Church. I have been approved to serve as a:

Paid staff member     Youth Group Leader     Sunday School Teacher  
 Nursery Supervisor     Chaperone     Key recipient     Other

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To indicate your understanding and compliance with these conditions, please initial each of the following paragraphs, sign this document, and return it to your supervisor or supervisory Board or Committee.

I understand that the church has a policy that requires me to report to the Safe Church Advocate (or Senior Minister) immediately, and file an Incident Report within 24 hours, if I believe that a child has been abused and/or neglected on MCC properties or at a church-related event or activity.

I understand that I am not to be alone in any room or secluded area on MCC property, or at any church related event, at any time, with a child or youth that is not my own or a relative, without permission of the child's parent/guardian.

I agree to abide by all policies and procedures regarding the use of the building and properties of MCC with the knowledge that failure to do so will result in the loss of my approval to serve as a volunteer or termination of my employment at MCC.

\_\_\_\_\_ I understand that copies of the *Safe Church Policies and Procedures* can be found in:

- 1) The Church Office;
- 2) The Christian Education Resource center; and
- 3) The Church Library in the Parlor.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Print Name

A copy of this document will be kept on file with the Safe Church Advocate.

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[mccsudma@earthlink.net](mailto:mccsudma@earthlink.net)

**STATEMENT OF COMPLIANCE  
FOR OUTSIDE ORGANIZATIONS**

I acknowledge that I have read and understand the *Youth Protection Guidelines*, which are summarized on the reverse side of this form, and agree to comply with all conditions set forth in that document in my activities at Memorial Congregational Church.

The organization I represent is \_\_\_\_\_

To indicate your understanding of your responsibilities as a guest in our church, please initial each of the following paragraphs, sign this document, and return it to the church office along with your "Application for Use of Facilities."

\_\_\_\_\_ I understand that I am required to report to the Safe Church Advocate (or Pastor) immediately and file an Incident Report within 24 hours, if I believe, or have been told, that there is reasonable cause to suspect that a child has been abused and/or neglected at Memorial Congregational Church.

\_\_\_\_\_ I understand that I am not to be alone in any room or secluded area on Memorial Congregational Church property at any time with a child or youth that is not my own or a relative without parental permission.

\_\_\_\_\_ When the activity that I am supervising has ended, and I am the last person in the church, I will make sure that the lights are out and the doors are locked before I leave.

\_\_\_\_\_ I agree to abide by all policies and procedures regarding the use of the building and properties of Memorial Congregational Church with the knowledge that failure to do so will result in the termination of my right to use church facilities for the organization that I represent.

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Signature

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Date

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Print Name

A copy of this document will be kept on file by the Safe Church Advocate.

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**IN-TOWN FIELD TRIP CONSENT FORM**

Your son/daughter \_\_\_\_\_ would like to participate in the following activity:

Activity \_\_\_\_\_

Purpose of activity \_\_\_\_\_

Date and start/finish time of activity \_\_\_\_\_

Leaders/Chaperones \_\_\_\_\_

Method of transportation \_\_\_\_\_

Cost \_\_\_\_\_ Other money needed \_\_\_\_\_

Additional information \_\_\_\_\_

Parent/guardian's name \_\_\_\_\_ Home phone \_\_\_\_\_

Address \_\_\_\_\_

Work Phone \_\_\_\_\_ Other phone/pager \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Do we have a **Medical Release Form** on file for your child? \_\_\_\_\_ Yes \_\_\_\_\_ No

If "no" please submit one. If "yes", does the **Medical Release Form** need updating?

Yes  No If "yes", please give updated information \_\_\_\_\_

Special Instructions

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I give my son/daughter \_\_\_\_\_ permission to participate in the activity listed above.

\_\_\_\_\_  
Parent/guardian's signature

\_\_\_\_\_  
Date



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**OVERNIGHT/OUT-OF-TOWN/SPECIAL ACTIVITY CONSENT FORM**

Your son/daughter \_\_\_\_\_ would like to participate in the following activity:

Activity \_\_\_\_\_

Purpose of activity \_\_\_\_\_

Date(s) and start/finish time of activity \_\_\_\_\_

Drop-off area for departure Pick-up area for return \_\_\_\_\_

Leaders/Chaperones \_\_\_\_\_

Method of transportation \_\_\_\_\_

Cost \_\_\_\_\_ Other money needed \_\_\_\_\_

Additional information \_\_\_\_\_

\_\_\_\_\_

Parent/guardian's name \_\_\_\_\_ Home phone \_\_\_\_\_

Address \_\_\_\_\_

Work phone \_\_\_\_\_ Other phone/pager: \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Do we have a **Medical Release Form** on file for your son/daughter? \_\_\_\_\_ Yes \_\_\_\_\_ No

If "no" please submit one.

If "yes", does the **Medical Release Form** need updating? \_\_\_\_\_ Yes \_\_\_\_\_ No

Special Instructions \_\_\_\_\_

If this is an overnight event, the girls and the boys will sleep in separate areas, and there will be sufficient adult supervision based upon the number and gender of participants. Only adult drivers will be used.

I give my son/daughter \_\_\_\_\_ permission to participate in the activity described on the front of this consent form.

\_\_\_\_\_  
**Parent/guardian's signature** **Date**

I agree to abide by the rules that have been established for this activity by the group leaders and by Memorial Congregational Church of Sudbury. In particular, I agree to cooperate with my group leaders and chaperones, and behave in a way that reflects well on my family and my church. I will not engage in any prohibited activities such as smoking, drinking of alcohol; or improper language, physical, or sexual activity. I understand that only adults may drive during youth activities, and I agree not to leave the activity and/or activity site without express permission of the group leader.

\_\_\_\_\_  
Youth's signature Date

**MEMCC  
172H  
FE1679**

**CHAPTER 6, §172H CORI REQUEST FORM**

Memorial Congregational Church is requesting all the available criminal offend record information (CORI) on the following individual from the Criminal History Systems Board pursuant to Chapter 6, § 172H which mandates organization primarily engaged in providing activities or programs to children 18 years of age or less that accepts volunteers, to obtain all CORI regarding volunteers prior to accepting any person as a volunteer.

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APPLICANT / EMPLOYEE INFORMATION (PLEASE PRINT)

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MIDDLE NAME

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (IF APPLICABLE)

\_\_\_\_\_  
PLACE OF BIRTH

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(Requested but not required)

MOTHER'S MAIDEN NAME: \_\_\_\_\_

CURRENT AND FORMER ADDRESSES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_

STATE DRIVER'S LICENSE NUMBER: \_\_\_\_\_

THE INFORMATION WAS VERIFIED WITH THE FOLLOWING FORM OF GOVERNMENT ISSUES  
PHOTOGRAPHIC IDENTIFICATION: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

**MEMORIAL CONGREGATIONAL CHURCH**  
**United Church of Christ**  
 26 Concord Road  
 Sudbury, MA 01776  
 Phone 978-443-3885  
[mccsudma@earthlink.net](mailto:mccsudma@earthlink.net)

**MEDICAL RELEASE FORM**

Name of Youth \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of parent/guardian \_\_\_\_\_

Youth's physician \_\_\_\_\_ Phone \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Health history (please check all that apply):

Frequent colds	Seizure disorder	Physical impairment
Appliances (retainer, contact lenses, etc.)	Stomach aches	Diabetes
Sleep disturbances	Mental impairment	Asthma
Emotional disability	Vision/hearing impairment	Motion sickness
		Behavioral problems

Other (describe) \_\_\_\_\_

Allergies (describe) \_\_\_\_\_

Give important details of items that are checked: \_\_\_\_\_

\_\_\_\_\_

Date of last tetanus shot \_\_\_\_\_

Is your son/daughter taking a prescription or non-prescription medication? \_\_\_\_ Yes \_\_\_\_ No

If yes, complete the following:

Medication \_\_\_\_\_

Dosage and frequency \_\_\_\_\_

Medication \_\_\_\_\_

Dosage and frequency \_\_\_\_\_

Medication \_\_\_\_\_

Dosage and frequency \_\_\_\_\_

Medications (continued)

Can your son/daughter be expected to take the right amount of medication at the proper time?

\_\_\_\_ Yes \_\_\_\_ No (If the answer is no, then arrangements must be made with the adult in charge.)

\_\_\_\_ I give my child permission to administer his/her own medications.

All medications, both prescription and non-prescription, MUST be in the original container and properly labeled. This applies even if your son/daughter has permission to self-administer his/her medications.

\_\_\_\_\_  
**Signature of parent/guardian**

\_\_\_\_\_  
**Date**

Youth's insurance carrier \_\_\_\_\_

Policy number or ID number \_\_\_\_\_

Subscriber's name \_\_\_\_\_

Subscriber Number \_\_\_\_\_

Insurance company customer service number \_\_\_\_\_

Other pertinent information \_\_\_\_\_

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**Statement of Consent**

I, the undersigned, parent/legal guardian of \_\_\_\_\_ do hereby consent to any X-ray exam, anesthetic, medical diagnosis, or treatment and hospital services that may be rendered to my son/daughter, under the general or specific instructions of the on-call physician at a hospital or clinic. It is understood that this consent is given in advance of any specific diagnosis or treatment, and it is given to encourage those persons who have temporary custody of my child in my absence, and said physician, to exercise their best judgment as to the requirements of such diagnosis or said medical treatment.

I understand that any and all medical expenses incurred are my responsibility and that there is not medical insurance coverage provided by Memorial Congregational Church of Sudbury, Massachusetts.

This consent will remain in effect for one year from signing unless otherwise specified.

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**Signature of parent/guardian**

**Date**

**MEMORIAL CONGREGATIONAL CHURCH**  
**United Church of Christ**  
26 Concord Road  
Sudbury, MA 01776  
Phone 978-443-3885  
[mccsudma@earthlink.net](mailto:mccsudma@earthlink.net)

**APPLICATION FOR EMPLOYEMNT**

Name \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

Street

\_\_\_\_\_

City

State

Zip Code

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

My previous experience in the past five years (paid or volunteer) related to the position I am seeking to fill includes: (Attach additional page(s) as necessary)

Agency Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Contact Person/Phone \_\_\_\_\_

Agency Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Contact Person/Phone \_\_\_\_\_

Agency Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Contact Person/Phone \_\_\_\_\_

I have never been found guilty of, or pled guilty or no contest to, nor am I awaiting trial for a criminal charge. \_\_\_\_\_ True \_\_\_\_\_ Not True

If not true, give a short explanation of the charge. (Include the date, nature, and place of the incident leading to the charge; where the charge was filed; and the precise disposition of the charge.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

No civil lawsuit alleging actual or attempted sexual discrimination, harassment, exploitation, or misconduct; physical abuse; Child / Elder Abuse; or financial misconduct has ever resulted in a judgment being entered against me, been settled out of court, or been dismissed because the statute of limitations has expired.

\_\_\_\_\_ True \_\_\_\_\_ Not True

If not true, give a short explanation of the lawsuit. (Include the date, nature, and place of the incident leading to the lawsuit; where the lawsuit was filed; and the precise disposition of the lawsuit.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have never terminated my employment, professional credentials, or service in a volunteer position or had my employment, professional credentials, or authorization to hold a volunteer position terminated for reasons relating to allegations of actual or attempted sexual discrimination, harassment, exploitation, or misconduct; physical abuse; Child / Elder Abuse; or financial misconduct. \_\_\_\_\_ True \_\_\_\_\_

Not True

If not true, give a short explanation. (Include the date of termination, name, address, and telephone number of employer or volunteer supervisor; and the nature of the incident(s) leading to your termination.) \_\_\_\_\_



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I attest that the information given in this application is true and complete. I understand that any misrepresentation or omission may be grounds for rejection of consideration for, or termination of, the position I am seeking to fill. I understand that it is my responsibility to amend the information given in this application if I discover that the information is incorrect when given or, though accurate when given, the information is no longer accurate.

I authorize Memorial Congregational Church of Sudbury and/or its agents to make inquiries regarding all statements I have given above. I also authorize all entities, persons, former employers, supervisors, courts, law enforcement, and other public agencies to respond to inquiries concerning me, to supply verification of the statements I have made, and to comment on and state opinions regarding my background and character. To encourage such persons and entities to speak openly and responsibly, I hereby release them from all liability arising from their responses, comments, and statements made in good faith and without malice.

Memorial Congregational Church of Sudbury's hiring process involves the distribution of information regarding applicants to those persons in a position to recruit, secure, and supervise the position I am seeking to fill. To that end, I authorize Memorial Congregational Church of Sudbury and its agents to circulate, distribute, and otherwise share information gathered in connection with this application to such persons for these stated purposes only. I understand that Memorial Congregational Church of Sudbury will share with me information it has gathered about me, if I request it to do so.

---

Signature

Date

**MEMORIAL CONGREGATIONAL CHURCH**  
**United Church of Christ**  
26 Concord Road  
Sudbury, MA 01776  
Phone 978-443-3885  
[mccsudma@earthlink.net](mailto:mccsudma@earthlink.net)

**KEY POLICY FOR MEMBERS OF  
MEMORIAL CONGREGATIONAL CHURCH**

Memorial Congregational Church's key policy for members is based on our values that openness, visibility and access will create the kind of safe community environment we seek. Hence:

1. Memorial Congregational Church will have an open door philosophy, meaning that once in the facility, all rooms are to be viewable and accessible to all persons at any time.
2. Any person who is a member of Memorial Congregational Church can have access to the facility for themselves and their family at any time.
3. If a member needs access to MCC before or after normal office hours, that member may be issued a key by signing the Member Key Registry and agreeing to the Key Registry conditions. The Registry is maintained by the Church Administrative Assistant.
4. The church's Administrative Assistant will keep a record of all key holders.