

INSTRUCTION SHEET FOR SIGN-IN SHEETS

29 November 2010

Please see the example sheet for each section.

Section 1: Please DO NOT fill in a page number. This is for OCP use only!

Section 2: There MUST be a date filled in. If not, we have no record of the actual date on which people were trained, and for audit purposes, we need to have the date.

Section 3: Please fill in the full title of the parish or school. For those of us who are new to the Diocese, an abbreviated name can be confusing.

Section 4: Please fill in the full name of the town, such as North Attleboro rather than just "Attleboro." If there are questions, those towns are in different locations in the directory and it saves time if we know right where to go for contact information.

Section 5: There must be a trainer name. Otherwise, we have no way of knowing if it is an authorized trainer who conducted the training.

Section 6: We also need the title of the trainer, as a back-up reference to ensure that the person is indeed an authorized trainer.

Section 7: Please remember to check whether it is a school or parish, since there are many of both with the same names, such as St. Mary's.

Section 8: This is for trainer's initials and **MUST** be completed! It is an audit measure to ensure that no names were written on the form after the training was done. When you initial this column next to each trainee name, it means you are verifying that you actually trained that person. In this column, it is also required that you initial next to each name. Drawing an arrow down is not allowed for this column!

Section 9: This is for the post-test score, from the new Training Guide. It is not mandatory at this point (hopefully that will change), but if you do a post-test, you should include the raw score. This means it is not the percentage, such as 75% or 81%, but the actual number of correct answers out of 44 possible.

Section 10: The applicant **MUST** print his/her name. Please ask people to print legibly, because we use this to enter training dates into our database. If you have people who have difficulty printing legibly, then after they have left, just print the name again at the bottom of the page with an asterisk and note, or do something to help us read the name.

Section 11: The name of the site must be filled in on the first line. If every trainee is from the same site, then an arrow can be drawn down to cover the rest of the trainees. If not, or if a trainee needs additional sites, you can fill those in as shown.

Section 12: The name of the town, city, or village must be filled in, but as in Section 11, if all of the trainees are from the same site, the town can just be filled in on the first line and an arrow down the column after that.

Section 13: Trainees **MUST** sign the form to verify attendance.

THANK YOU FOR YOUR DILIGENCE!!

Example!

CATHOLIC SOCIAL SERVICES
ABUSE PREVENTION TRAINING (Off-Site)

- ③ LOCATION NAME: Perfect Parish
- ④ CITY/TOWN: Fall River
- ⑤ TRAINER: Deborah Jones
- ⑥ TRAINER TITLE: DRG
- ⑦ TRAINING IS FOR (please check one): Parish Staff/Volunteers School Staff/Volunteers

IN INK ONLY, please print your name; write in your parish or school in which you volunteer/work, the city/town; and sign. Thank you!

T.I.	Score	PRINT NAME	PARISH/SCHOOL	CITY/TOWN	SIGNATURE
⑧ 40		Elvira M. Gonzalez	Perfect Parish	Fall River	<i>[Signature]</i>
⑨ 37		TIM WASSER-HEITZ			<i>[Signature]</i>
⑩ 34		Sarah Mitchell			<i>[Signature]</i>
⑪ 36		Adam Haller			<i>[Signature]</i>
⑫ 42		Sande AmaraL			<i>[Signature]</i>
⑬ 39		Cheryl Bedard			<i>[Signature]</i>
⑭ 43		LORRAINE FERNANDES			<i>[Signature]</i>
⑮ 44		Nyiemga Smith Garcia	Perfect Parish / School	Fall River/Westford	<i>[Signature]</i>