Diocese of Rockford Empowering God's Children Training Compliance Acknowledgment

Child First & Last Name (print):	Grade:
(If multiple children in the family, each child must have a separate form submitted as lesson v	ideos and materials are different)
My child watched the age appropriate Video Lesson:	☐ Yes ☐ No
My child completed Activity # from the provided lesson:	☐ Yes ☐ No
I discussed the Lesson Materials with my child:	☐ Yes ☐ No
➤ I choose to Opt-Out of the training program and not train my child:	☐ Opt-Out ofTraining
Date Training Was Completed (today's date if Opt-Out is selected):	
I acknowledge that I have trained my child in compliance with the Diocese of Ro Program for Teaching Safety — Empowering God's Children. I have shared the v child and discussed the lesson materials accordingly. Parent Name (Print):	
Parent Signature:	
Today's Date:	
For Office Use Only	
Parish/School Name:	-
Training Lesson Cycle (circle one): Year 1 Year 2 Year 3	
Activity # Completed (circle one): 1 2 3 4 5 6 7	8 9

