DIOCESE OF ALLENTOWN
OFFICE OF CATHOLIC HEALTH,
HUMAN SERVICES, AND YOUTH PROTECTION
OFFICE OF THE SECRETARY
POST OFFICE BOX F
ALLENTOWN, PENNSYLVANIA 18105-1538

DIOCESE OF ALLENTOWN
CHILD PROTECTIVE SERVICES LAW POLICY
ACKNOWLEDGMENT FORM

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE DIOCESE OF ALLENTOWN'S CHILD PROTECTIVE SERVICE LAW POLICY.

I HAVE REVIEWED THE CHILD PROTECTIVE SERVICES LAW POLICY AND UNDERSTAND ITS CONTENTS, AND THE PROCESS THAT I MUST COMPLETE IF I HAVE REASONABLE CAUSE TO SUSPECT THAT A CHILD HA S BEEN SUBJECTED TO CHILD ABUSE OR ACTS OF CHILD ABUSE.

I FURTHER UNDERSTAND THAT THE DIOCESE OF ALLENTOWN HAS ISSUED THE CHILD PROTECTIVE SERVICES LAW POLICY FOR INFORMATIONAL OR GUIDANCE PURPOSES ONLY AND THAT THE DIOCESE DOES NOT INTEND FOR THE POLICY TO CREATE A CONTRACT OR ANY TYPE OF BINDING OBLIGATION ON THE DIOCESE. THE DIOCESE OF ALLENTOWN MAY PERIODICALLY REVIEW THE CHILD PROTECTIVE SERVICES LAW POLICY, AND IT RESERVES THE RIGHT TO AMEND OR INTERPRET THE POLICY AS IT DEEMS APPROPRIATE IN ITS SOLE DISCRETION. A COPY OF THIS ACKNOWLEDGMENT FORM SHALL BE PLACED IN MY PERSONNEL OR VOLUNTEER FILE.

_____ (DATE)

_____ (SIGNATURE OF EMPLOYEE/VOLUNTEER)

_____ (PLEASE PRINT NAME)

ST. MICHAEL THE ARCHANGEL
4121 OLD BETHLEHEM PIKE
BETHLEHEM, PA 18015

_____ (DIOCESAN LOCATION)

_____ (CITY)