Verification Form

To: Parents/Guardians  
Date: School Year 2020-21  
Re: Training for students in Catholic schools and parish religious education programs  

After you have instructed your child(ren) in the safe environment lesson provided by your parish or school, please complete the information below and return as directed.

Name of student: ____________________________
Parish/school name: ____________________________
Grade: ________
Title of lesson taught: ____________________________

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Parish/school name: ____________________________
Grade: ________
Title of lesson taught: ____________________________

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Name of student: ____________________________
Parish/school name: ____________________________
Grade: ________
Title of lesson taught: ____________________________

I have received the training materials and used them to teach my child(ren) the lesson as requested.

Signature of parent/guardian: ____________________________
Printed name: ____________________________
Date: ____________________________