

**CERTIFICATE OF ATTENDANCE\***  
**TEEN LEADER MINISTRY VOLUNTEER**  
**SAFE ENVIRONMENT SESSION**

Check <input checked="" type="checkbox"/> Today's Session Type Below:
Initial Session
Re-Training Session

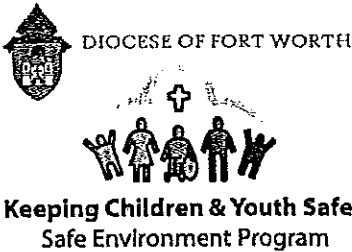
**Keeping Children & Youth Safe Safe Environment Program** (for Teen Age 13 years old minimum 7<sup>th</sup> grade- through 17 years old any grade)

Your Legal Name (As it appears on your State/Government I.D. or birth certificate):	
E-mail or your home address (please no P.O. Box):	Telephone Number:
Name of Parish/School/Other Entity at Which You Volunteer:	City:

Session Date:	Names of Session Facilitators:
Today's Session Location (Name of Parish/School/Other Entity):	City:

Check  all categories below that apply to your volunteer status, at a parish/school/ other entity.

<b>VOLUNTEER (Check Ministry Type):</b> <input type="checkbox"/> Choir <input type="checkbox"/> Faith Formation <input type="checkbox"/> Liturgical Ministry <input type="checkbox"/> Musician <input type="checkbox"/> SE Facilitator <input type="checkbox"/> Other: _____
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This certifies that \_\_\_\_\_  
 (Name)

Session Date: \_\_\_\_\_

satisfactorily completed the "TEEN LEADER SAFE ENVIRONMENT " Session, identified by type above,  
 at:

Session Location (Parish/School/Other Entity): \_\_\_\_\_

**\*CERTIFICATE INVALID WITHOUT FACILITATORS' SIGNATURES**

Facilitator 's Signature:	Facilitator's Printed Name:
Facilitator's Signature:	Facilitator's Printed Name:

*For Questions or Verification: Please Contact the Parish/School Office Hosting the Session at Phone # \_\_\_\_\_ and Ask to Speak with the Safe Environment Coordinator. Thank You.*

