

New Volunteer Compliance Paperwork



The Archdiocese of Chicago requires all STV School and Parish Volunteers to complete the following volunteer paperwork **BEFORE** they start their volunteer work:



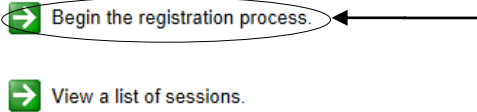

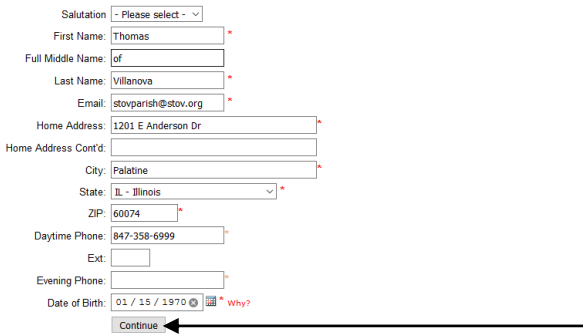
1. **A CANTS Form** *(done yearly)*
2. **A Code of Conduct Form**
3. **A Background Check**
4. **Attend a VIRTUS Training Session**
5. **Complete DCFS' Mandated Reporter Training Online**

First you will register for a VIRTUS online account on www.virtus.org. Here you will print out a CANTS form, electronically sign a Code of Conduct form, pre-register for a VIRTUS Training session, and submit a background check.

Then you will go to the Illinois DCFS website (mr.dcfstraining.org) to complete your Mandated Reporter Training.

Finally you will submit your CANTS Form and Mandated Reporter Certificate of Completion to John Breit at the Parish Office.

To complete your volunteer paperwork, please follow the instructions below:

<p>Go to www.virtus.org.</p>	
<p>Click on the green "First-Time Registrant" button the left-hand side of the page.</p>	
<p>Click on "Begin the registration process" link.</p>	
<p>Select Chicago, IL (Archdiocese) from the drop-down menu and then click on the Select button.</p>	<p>Please select your Archdiocese/Diocese/Religious Organization from the list below:</p> 
<p>Create a User ID and Password. Then click the Continue button.</p>	<p>Create a User ID: <input type="text"/></p> <p>Create a Password: <input type="password"/></p> <p><input type="button" value="Continue"/></p>
<p>You will be asked for your first name, full middle name, last name, email, home address, a phone number and your date of birth.</p> <p>When you are finished filling out the required information, click on the Continue button.</p>	

Please select the primary location with which you are associated.

Location:

OR

Location:

Depending on your ministry, select either **St. Thomas of Villanova (Palatine)** OR **St. Thomas-Villanova School (Palatine)** as your Primary Location.

Once you have chosen a primary location, another form will appear below asking for your role within St. Thomas.

Check **Volunteer** and any other role that applies to you.

When you are finished, click on the Continue button.

Please select all of the roles that you perform at this location

Please check all that apply. You must select at least one role.

- Candidate for ordination
- Deacon
- Educator
- Employee (Diocesan/Eparchial)
- Employee (Parish/Parochial)
- Priest
- Volunteer

- Catechist
- Coach
- DRE/CRE
- Scout Leader
- Youth Minister



Continue

If you are associated with any other parishes, you are given the option to select them.

Are you associated with any other locations?

Next you will answer a question concerning your work with minors/vulnerable adults and a question about your employment status in the Archdiocese.

When you are finished, click on the Continue button.

Do you interact with, work with or come into contact with minors and/or vulnerable adults of the archdiocese?
 Yes | No

Are you employed in a location within the Archdiocese, parish, or school?

Yes | No

continue

You will now be asked to print out and fill out a **CANTS form**.

This form authorizes the Archdiocese of Chicago to run a background check in the State of Illinois' DCFS database.

It is **mandatory** to fill out this form and return it to Deacon John Breit at the Parish Office.

To print out the CANTS Form, click on the double arrow at the top right corner of form and select **Print** from the list of options. (A copy of the CANTS form is also provided for you on the last page of this packet.)

After you have filled out the form, click on the checkbox stating that you will return the CANTS form to Deacon John Breit at the Parish Office.

When you are finished, click on the Continue button.

Archdiocese of Chicago, IL

CANTS (Child Abuse & Neglect Tracking System)

CFS 689
Rev 7/2012

State of Illinois
Department of Children and Family Services
AUTHORIZATION FOR BACKGROUND CHECK
Child Abuse and Neglect Tracking Systems (CANTS)
For Programs NOT Licensed by DCFS

NOTE: Do not use this form if you are an applicant for licensure or an employee/volunteer at a care facility. Please contact your licensing representative.

Name: _____
Last First Middle

Date of Birth: [] - [] - [] Gender: Male Female Race: _____

Current Address: _____
Street/Apt #
City State Zip

If you currently reside in Illinois, please list all previous addresses for the past five years.
OR
If you currently reside out-of-state, please provide ALL Illinois addresses in which you did reside while living in Illinois.
Dates From To
(Street/Apt#/City/County/State/Zip Code)

Problems viewing PDF? [Click Here](#)

I will download this form, fill it out and return it to my parish or school office.

Continue

2

3

You will now be asked to download and read the Archdiocese of Chicago's **Code of Conduct Form**.

This document (the first four pages) explains the professional role you must maintain when working with children, young people, and vulnerable adults in your ministry.

You can download the Code of Conduct by clicking on the double arrow at the top right corner of form and selecting **Download** from the list of options.

Once you have read the Code of Conduct, click on the checkbox stating that you have downloaded, read and understand the document.

Then provide an electronic signature for the document by typing in your name and date in the space provided.

When you are finished, click on the Continue button.

Archdiocese of Chicago, IL
Code of Conduct

Code of Conduct for Church Personnel

As someone who ministers to young people and/or vulnerable adults, I will maintain a professional role and be mindful of the trust and power I possess as a minister and vulnerable adults.

To achieve this, I **WILL NOT**:

- Touch a minor or vulnerable adult in a sexual way or other inappropriate manner.
- Be alone with a minor or vulnerable adult in a residence, rectory, sleeping quarters, or other closed room.
- Share a bed with a minor or vulnerable adult.
- Take an overnight trip alone with a minor or vulnerable adult.
- Acquire, possess or distribute pornographic images of minors under the age of 18.
- Introduce sexually explicit or pornographic topics, vocabulary, music, recordings, films, games, websites, computer software or entertainment to a minor or vulnerable adult.
- Provide alcohol, cigarettes or controlled substances to a minor or vulnerable adult.

Problems viewing PDF? [Click Here](#)

I have downloaded, read, and understand this document.

Please provide an electronic signature to confirm you have read this document.

Full Name (first, middle and last): Thomas Villanova (John P. Smith)

Today's Date: 11/16/2017 (mm/dd/yyyy)

Continue

You will now be asked to download and read the **Declarations Form**.

You can download the Declarations Form by clicking on the double arrow at the top right corner of form and selecting **Download** from the list of options.

Once you have read all of the declarations, click on the checkbox stating that you have downloaded, read and understand the document.

Then provide an electronic signature for the document by typing in your name and date in the space provided.

When you are finished, click on the Continue button.

Archdiocese of Chicago, IL
Declarations

12. I understand and agree that I am providing this volunteer service without promise, expectation or receipt of compensation or remuneration. I further understand and acknowledge that I may discontinue my service at any time.

13. I understand and agree that I am performing this volunteer service without pressure or coercion, direct or implied, from the Archdiocese, its schools, parishes, and agencies.

14. I understand and agree that I am performing this volunteer service for my own civic, religious, charitable or humanitarian purpose and not as a servant or employee of the Archdiocese of Chicago, its schools, parishes, and agencies.

15. My signature indicates that I have read and understand the above statements.

Do not sign until you have read and initialed the above statements.

Problems viewing PDF? [Click Here](#)

I have downloaded, read, and understand this document.

Please provide an electronic signature to confirm you have read this document.

Full Name (first, middle and last): Thomas Villanova (John P. Smith)

Today's Date: 11/16/2017 (mm/dd/yyyy)

Continue

You will now be asked if you have already attended a VIRTUS training session.

Click **NO**.

Have you already attended a session?

YES

NO

You will now sign-up for a **VIRTUS training session.**

VIRTUS is an in-person training on the prevention of child sexual abuse. It is a 3-hour long training session.

Select the session you'd like to attend by clicking on the circle next to the name of the session.

A pop-up box will appear asking "Are you sure this is the session you wish to attend?"

Click on the OK button.

Please select the session you wish to attend

Protegiendo a los Niños de Dios
 Where: Sacred Heart School-16th Ave (Melrose Park)
 815 N. 16TH AVE.
 When: Friday, November 17, 2017
 3:00 PM
 Estimated length of session: 3 hrs
 Spaces remaining: 7 of 8
 Language: This session will be conducted in Spanish
 Notas: ESTA SESION SERA EN ESPAÑOL. SALON 102 DE CCD PARA LOS MINISTROS DE SAN PABLO. FAVOR DE NO TRAER NIÑOS Y LLEGAR 10 MINUTOS ANTES 11:50 AM. NO SE PERMITE LA ENTRADA UNA VEZ QUE EMPIECE LA SESION.

Selecting God's Children for Adults
 Where: St. Anastasia School (Waukegan)
 629 GLEN FLORA AVE.
 When: Saturday, November 18, 2017
 9:00 AM
 Estimated length of session: 3 hrs
 Spaces remaining: 1 of 20
 Language: This session will be conducted in English
 Notas: Session is for St. Anastasia families only. The training will take place in the computer room on the 2nd floor. No one under the age of 18 allowed. Session will start promptly at 9am. NO LATECOMERS will be accepted.
 Wheelchair accessible: Yes

Protegiendo a los Niños de Dios
 Where: St. Paul 25th (Chicago Heights)
 256 E. 25TH ST
 When: Saturday, November 18, 2017
 12:00 PM
 Estimated length of session: 0 hrs
 Spaces remaining: 22 of 30
 Language: This session will be conducted in Spanish
 Notas: ESTA SESION SERA EN ESPAÑOL. SALON 102 DE CCD PARA LOS MINISTROS DE SAN PABLO. FAVOR DE NO TRAER NIÑOS Y LLEGAR 10 MINUTOS ANTES 11:50 AM. NO SE PERMITE LA ENTRADA UNA VEZ QUE EMPIECE LA SESION.
 Wheelchair accessible: Yes

You will now be asked to complete a **Volunteer Background Check.**

Click on the blue "Click here to complete your volunteer background check" link.

If you are a volunteer, you are not done!

You must complete a background check for a volunteer

[Click here to complete your volunteer background check](#)

Click on the Submit Background Check button to **initiate** a background check request.

Background Check for a Volunteer

You are required to have a background check.

All of your information is prepared and ready to send to s2verify.

Please click the button below when you are ready to submit your information

Submit Background Check

YOU WILL NOW HAVE TO LOGIN TO YOUR EMAIL TO COMPLETE THE BACKGROUND CHECK.

The email will come from the Archdiocese of Chicago with the subject line of "Background Check."

Click on the blue "Get Started" button to continue.

As a part of our process to volunteers, you must successfully complete a background check. In order to make this process quick and easy, the Archdiocese of Chicago requires that you complete the following request. By providing this information electronically it can be safely and securely transmitted to our background check vendor instantly. This enhanced process can remove days of waiting from the overall process. Please remember to do the following:

- 1) Complete all fields
- 2) Use your legal name as shown on your driver's license or state ID and add any maiden or previous names to the additional names section
- 3) Review your answers for accuracy and spelling
- 4) If you have any questions or special circumstances you should call our office at [312-534-5254](tel:312-534-5254) before submitting this request.

Sincerely,
Mary Jane Doerr
Archdiocese of Chicago
[835 N. Rush](tel:312-534-5254)
Chicago, IL 60611

GET STARTED

Click on green "Continue" button on the next two screens.

The first screen reminds you to provide complete and accurate information (i.e. using your full legal name).

The second screen is a Disclosure Statement.

Thomas Villanova

Click Here to Start Over

As a part of our hiring process, you must successfully complete a background check. In order to make this process quick and easy, Archdiocese of Chicago - All Connections? Year Arrest requires that you complete the following request. By providing this information electronically it can be safely and securely transmitted to our background check vendor instantly. This enhanced process can remove days of waiting from the overall process. Please remember to do the following:

- 1) Complete all fields
- 2) Use your legal name and information and add any maiden or previous names to the additional names section
- 3) Review your answers for accuracy and spelling
- 4) If you have any questions or special circumstances you should call our office at 312-534-5319 before submitting this request.

Thank You,
Mary Jane Doerr
Archdiocese of Chicago - All Connections? Year Arrest

Continue

Page 1

FCRA DISCLOSURE STATEMENT

In connection with your application with Archdiocese of Chicago (COMPANY) and any subsidiary, you may have information requested about you from a consumer reporting agency for "employment purposes" as such term is used within The Fair Credit Reporting Act 15 U.S.C. § 1681. This information may be obtained in the form of consumer reports and/or investigative consumer reports.

These reports may contain information about your character, general reputation, personal characteristics and/or mode of living. The types of information that may be obtained include, but are not limited to: social security number verifications, address history, criminal records checks, public court records checks, driving records checks, employment history verifications, and professional licensure/certification checks. This information may be obtained from private and/or public records sources, including, as appropriate, governmental agencies and courthouses, educational institutions, former employers, or other information sources.

If adverse action is taken from information obtained, in whole or in part, from a consumer report and/or investigative consumer report from a consumer reporting agency, you have the right to receive a copy of the report(s) from the consumer reporting agency. The consumer reporting agency which prepared the consumer report and/or investigative consumer report was S2Verify, LLC. S2Verify, LLC can be contacted at P.O. Box 2587, Roswell, GA 30077 or by phone at (770)649-8282 or by email at compliance@s2verify.com.

Continue

At the bottom of the last page, provide your FULL LEGAL name and date of birth.

Then click on the radio button next to "I Agree."

When you are ready to submit your background check, click on the green "Continue" button.

By my signature below, I certify the information I provided on, and in connection with, this form is true, accurate, and complete. I agree that this Authorization form in original, facsimile, photocopy, or electronic (including electronically signed) formats, will be valid for any reports that may be requested by, or on behalf of, COMPANY.

Additional State Law Notices

California, Oklahoma and Minnesota: You have the right to receive a copy of your background/investigative report by checking the box on the Authorization of Background Investigation form.

Massachusetts and New Jersey: If we request an investigative background report, you have the right, upon written request, to a copy of the report.

Minnesota and Washington State: If COMPANY requests an investigative background report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from COMPANY a complete and accurate disclosure of the nature and scope of the investigation requested by COMPANY. The COMPANY will provide the disclosure of the nature and scope of the investigation either five days after receiving your request or after requesting the investigative consumer report, whichever is later.

New York Applicants Only: You have the right to request whether the COMPANY requested an investigative consumer report and, if so, the COMPANY will give you the name and address of the report's provider if other than the consumer reporting agency identified above. You have the right to inspect and receive a copy of any investigative consumer report requested by the COMPANY by contacting the consumer reporting agency identified above (or another organization identified by the COMPANY as the provider of an investigative consumer report) directly.

Washington State: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Last Name: *


First Name: *

Date of Birth: *

Date Signed: Thursday, Mar 22, 2018

Authorization of Background Investigation: I Agree I Do Not Agree

You have now completed your VIRTUS Online registration! In order to complete your volunteer paperwork you still have **three more things to do**...:

1. **Attend your VIRTUS Session.** Remember to arrive on time for your pre-registered session or you will be asked to leave.
2. **Complete DCFS' Mandated Reporter Training online.** This online training provides adults with the knowledge of how to recognize and report child abuse and neglect. Go to mr.dcfstraining.org to complete the 20-40 minute online training. Once you have completed the online training, you will receive a certificate of completion. The certificate looks like this 
3. **Turn in your CANTS form and your Mandated Reporter Certificate of Completion** to Deacon John Breit at the Parish Office. You may also email both papers to jbreit@stov.org.



REMEMBER: In order to continue as a volunteer, you are required to read the monthly VIRTUS bulletins online. You are also required to submit a new CANTS form each year you volunteer. You will receive email reminders from VIRTUS when new bulletins are available and when it's time to submit another CANTS form.

If you have any questions about volunteer paperwork, please contact Deacon John Breit at 847-358-6999 / jbreit@stov.org.

State of Illinois
Department of Children and Family Services

AUTHORIZATION FOR BACKGROUND CHECK
Child Abuse and Neglect Tracking System (CANTS)
For Programs NOT Licensed by DCFS

NOTE: Do not use this form if you are an applicant for licensure or an employee/volunteer of a licensed child care facility. Please contact your licensing representative.

Name: _____
Last First Middle

Date of Birth: -- -- Gender: Male Female Race: _____

Current Address: _____
Street/Apt #

City State Zip Code

If you currently reside in Illinois, please list all previous addresses for the past five years.

OR

If you currently reside out-of-state, please provide ALL Illinois addresses in which you did reside while living in Illinois.

(Street/Apt#/City/County/State/Zip Code) Dates
From/To

List maiden name and/or all other names by which you have been known: (last, first, middle)

I hereby authorize the Illinois Department of Children and Family Services to conduct a search of the Child Abuse and Neglect Tracking system (CANTS) to determine whether I have been a perpetrator of an indicated incident of child abuse and/or neglect or involved in a pending investigation. I further consent to the release of this information to the agency listed below.

Submit by mail OR fax OR email.
Mail to: Department of Children and Family Services
406 E. Monroe – Station # 30
Springfield, IL 62701
FAX to: 217-782-3991
Scan/Email to: CFS689Background@illinois.gov

Signed Date

Please type, use bold letters or label:

312-751-8307 (Submitting Agency Fax Number)

safekids@archchicago.org (Submitting Email Address)

Archdiocese of Chicago (Agency Name)

Mary Jane Doerr (Contact Person)

743 North Dearborn Street (Address)

Chicago, Illinois 60654 (City/State/Zip)