

# Parish Report Form

## **VIRTUS Protecting God's Children Touching Safety Program**

Parish: \_\_\_\_\_ City: \_\_\_\_\_

Setting: \_\_\_ Catholic School \_\_\_ Religious Education Program

Academic Year: \_\_\_\_\_

The following grades received instruction during the course of the academic year:

*[Please check the grade levels that apply]*

\_\_\_ K      \_\_\_ 1      \_\_\_ 2      \_\_\_ 3      \_\_\_ 4      \_\_\_ 5  
\_\_\_ 6      \_\_\_ 7      \_\_\_ 8      \_\_\_ 9      \_\_\_ 10      \_\_\_ 11      \_\_\_ 12

TOTAL number of students receiving instruction: \_\_\_\_\_

TOTAL number of students not participating in instruction (i.e. absent): \_\_\_\_\_

TOTAL number of students who opted out: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

*Please send completed form to:* Office of Child and Youth Protection  
Diocese of Jefferson City  
P.O. Box 104900  
Jefferson City, MO 65110  
Fax: 573-635-2286  
Email: [review@diojeffcity.org](mailto:review@diojeffcity.org)