



# OSA Safeguarding

## OSA Adult Code of Behaviour Safeguarding Commitment

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Ministries: (1) \_\_\_\_\_

\_\_\_\_\_

(2) \_\_\_\_\_

\_\_\_\_\_

(3) \_\_\_\_\_

\_\_\_\_\_

(4) \_\_\_\_\_

\_\_\_\_\_

## Having read and understood this Code of Behaviour:

- I commit to honour it in word & deed while active in my current Augustinian role & any future role I may have within this Church/Parish & its various ministries.
  
- I confirm there is nothing within my background and/or experience that would make me unsuitable to have contact with children and/or to work with children & young people.
  
- I accept that any breach of these standards will be taken very seriously by the Prior/Parish Priest in the interest of ensuring children's & young people's safety and protection within our shared and sacred spaces.

Signed: \_\_\_\_\_

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



For Church/Parish Use Only (Complete where applicable):

Training Date: \_\_\_\_\_

Retraining Due: \_\_\_\_\_

Type of Training Completed:

Information Awareness (2 Hrs.)  or Full-Day Session

Vetting Date: \_\_\_\_\_ Renewal Due: \_\_\_\_\_

Signed: \_\_\_\_\_

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

Position: \_\_\_\_\_