Episcopal Diocese of Hawai'i Acknowledgment of Receipt of Safeguarding Policy

For the	year:		
Congre	gation:		
I acknowledge that I have received a copy of the Safeguarding Policy (revised Feb 2017) for the Diocese of Hawai'i. I have read this document and agree to act in compliance with its terms. Further, I agree to abstain from any behavior that constitutes Sexual Misconduct (as defined by the Diocesan Policy) in connection with my work with any institution related to the Diocese of Hawai'i, regardless of whether I work as a paid employee, contractor, or volunteer.			
	Print Name	Position*	Signature
	* V/BC: Vestry/Bishop's Committ	ee; E: Lay Emplo	oyee; C: Clergy; Vol: Volunteer
youth a			person, volunteer who regularly supervises d employees shall sign this statement. Please
	Make a copy of this signed acknowledgement and attach a copy of the Vestry/Bishop Committee Minutes adopting the Safeguarding Policy and affirming its applicability. Send both to the Office of the Bishop.		
	Keep the originals on file in the church's permanent records.		