



## Verification Form

**To:** Parents/Guardians

**Date:** School Year 2020-21

**Re:** Training for students in Catholic schools and parish religious education programs

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After you have instructed your child(ren) in the safe environment lesson provided by your parish or school, please complete the information below and return as directed.

Name of student: \_\_\_\_\_

Parish/school name: \_\_\_\_\_

Grade: \_\_\_\_\_

Title of lesson taught: \_\_\_\_\_

Name of student: \_\_\_\_\_

Parish/school name: \_\_\_\_\_

Grade: \_\_\_\_\_

Title of lesson taught: \_\_\_\_\_

Name of student: \_\_\_\_\_

Parish/school name: \_\_\_\_\_

Grade: \_\_\_\_\_

Title of lesson taught: \_\_\_\_\_

Name of student: \_\_\_\_\_

Parish/school name: \_\_\_\_\_

Grade: \_\_\_\_\_

Title of lesson taught: \_\_\_\_\_

*I have received the training materials and used them to teach my child(ren) the lesson as requested.*

Signature of parent/guardian: \_\_\_\_\_

Printed name: \_\_\_\_\_

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