

Code of Conduct: Statement of Agreement

I promise to strictly follow the rules and guidelines in this Code of Conduct as a condition of my providing services to the children and youth of the Archdiocese of Boston.

I will:

Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration.

Never be alone with children and/or youth at Church activities.

Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.

Maintain confidentiality in all matters related to normal parish business.

Comply with the mandatory reporting regulations of the Commonwealth of Massachusetts and with the Archdiocesan Policies and Procedures to report suspected child abuse. I understand that failure to report suspected child abuse to civil authorities is against the law.

Cooperate fully in any investigation of abuse of children and/or youth.

I will not:

Touch or speak to a child and/or youth in a sexual or other inappropriate manner

Inflict any physical or emotional abuse such as striking, spanking, shaking, slapping, humiliating, ridiculing, threatening, or degrading children and/or youth.

Smoke or use tobacco products while engaging in activities with children and/or youth.

Accept or give gifts to children or youth without the knowledge of their parents or guardians.

Possess, or be under the influence of alcohol at any time while working with children and/or youth.

Possess, or be under the influence of illegal drugs at any time.

Use profanity in the presence of children and/or youth at any time.

I understand that as a person working with and/or ministering to children and/or youth, I am subject to a criminal history background check. My signature confirms that I have read this Code of Conduct and that as a person ministering to children and youth I agree to follow these standards. I understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in my removal from ministry.

Printed Name:

Signature/Date:

Witness Signature/Date