

Entity Name _____ Date _____

1. Does the Applicant's employment process include verification of whether the individual has ever been convicted of any crime, including sex related or child-abuse related offenses, before an offer of employment is made? Yes No
2. a) Does your state permit you to do criminal background investigations? Yes No
b) If yes, do you routinely request and receive such background investigations? Yes No
3. Do you verify employment related references? Yes No
4. Do you conduct a personal interview? Yes No
5. Do you have written procedures for dealing with sexual abuse? Yes No
If yes, please attach a copy.
6. Do you have a plan of supervision that monitors staff in day-to-day relationships with clients, both on and off premises? Yes No
7. Is there an overnight youth exposure? Yes No
8. Are parents present? Yes No
9. a) Has your organization ever had an incident which results in an allegation of sexual abuse? Yes No

If yes, please describe. _____

- b) Was a claim made against the organization? Yes No
- c) Was the case settled? Yes No
- d) Was the case taken to trial? Yes No
- e) How much money was paid as damages to the victim? \$ _____

10. Regarding coverage for abuse & molestation, does your current insurance program:

- _____ a) Exclude coverage
_____ b) Limit coverage (Please indicate limit of liability) \$ _____
_____ c) Neither exclude nor limit coverage

Please indicate age range of clients _____

11. Limits requested \$ _____

REMARKS: _____

