

## Acknowledgement of Compliance With Child Protection Policies

By signing my name below, I agree, certify, and acknowledge the following:

That I have been provided with a copy of Willamette University’s policies for reporting suspected child abuse and misconduct. That I have read the above policy, which include the procedures for reporting suspected or observed child abuse or neglect.

That I have completed Willamette University’s training program for youth programs in Workday.

That I fully understand the requirements of Willamette University’s child protection policies as well as my responsibilities under it.

That I agree to abide by and comply with the child protection policies at all applicable times. That I understand that these may be changed, withdrawn, added to, or interpreted at any time at the institution’s discretion and without prior notice. That Willamette University will not tolerate abuse or neglect of children, and I agree to comply in spirit and in action with this position.

**Signature**

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**Printed Signature**

**Date of Birth**

**Date**

**\*Below should also be completed by the parent or guardian of anyone age 18 or younger:**

**By my signature, I certify that I have read and understand the policy. My signature also confirms that I do not know of any reason why my child should not interact with other children. My child does not demonstrate any signs of being a potential risk to children.**

**Parent/Guardian Signature**

**Date**

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**Printed Signature**