

	<p>Verification of Chapter Compliance with National AMBUCS, Inc. Improper Sexual Conduct Policy</p>
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The _____ Chapter of National AMBUCS, Inc. fully supports the parent organization’s Improper Sexual Conduct Policy, as communicated in its policy document and more concisely in its policy statement:

“National AMBUCS, Inc. has a zero tolerance for improper sexual conduct – from staff, volunteers, or anyone else designated to act in a capacity associated with our name and our mission. We always have been, and will continue to be, committed to the safety and well-being of all persons we serve.”

Our chapter will comply with the policy by doing the following: **(Check one only)**

- Option 1: “Buddy System”**
We will require all members/volunteers to use a “buddy system” when engaging in chapter activities with children/youth, developmentally disabled individuals of any age, and senior citizens (whereby at least one adult must be a chapter member and at least one adult must be 21 years of age or older). All chapter members/volunteers have been reminded that the Improper Sexual Conduct Policy, including the Common Sense Measures to Maintain Safe Environments for Charitable Activities, is available on the AMBUCS website for further review.

- Option 2: Criminal Background Checks**
We will ensure that the name of any member/volunteer who may be in “a one-to-one unsupervised situation with a person served” is forwarded to the AMBUCS Resource Center so that they may receive a criminal background check. All chapter members/volunteers have been reminded of the additional benefits of using a “buddy system,” and that the Improper Sexual Conduct Policy, including the Common Sense Measures to Maintain Safe Environments for Charitable Activities, is available on the AMBUCS website for further review.

Signature of Chapter President

Date

With my signature, I am verifying that the topic our chapter’s compliance with the National AMBUCS, Inc. Improper Sexual Conduct Policy was an agenda item at our chapter meeting on _____ month / day / year.

A copy of this form will be kept in our chapter’s permanent records and (where applicable) the discussion is noted in the minutes filed for the above date.

Please return this completed form to Glenda Harrell, administrative supervisor, by May 31, 2017 glendah@ambucs.org or fax: 336-852-6830.