|  |  |
| --- | --- |
| ***ENTITY INFORMATION*** | |
| Member Name: | |
| Do you comply with all Title IX, WAC, and RCW regulations regarding training on sexual abuse? | Yes  No |
| Has the school board adopted and incorporated WSSDA policy 5253 for your district? | Yes  No |
| Are records maintained documenting adherence to all applicable policies and procedures, e.g., hiring and screening, code of conduct, training, and follow-up procedures? | Yes  No |
| Are state background checks performed on all employees/applicants and volunteers? Employees:  Volunteers: | Yes  No Yes  No |
| Are federal background checks performed on all employees/applicants and volunteers? Employees:  Volunteers: | Yes  No Yes  No |
| Do you have established policies and procedures regarding obtaining background Employees:  checks at least every 3 years for employees and volunteers? Volunteers: | Yes  No Yes  No |
| Do you have a written crisis plan for dealing with employees, victims, parents, authorities, and the media if you have an incident of abuse? | Yes  No |
| Have written procedures, including rules, code of conduct, and disciplinary measures been established and provided to all employees and volunteers?  **If yes**, do written procedures clearly define the policy and consequences of non-adherence? | Yes  No  Yes  No |
| Are there policies and procedures in place maintaining professional boundaries between staff (employees and volunteers) and students?  **If yes**, do written procedures clearly define the policy and consequences of non-adherence? | Yes  No  Yes  No |
| Are there written professional boundary reporting procedures?  **If yes**, are they posted? | Yes  No  Yes  No |
| Are coaches and advisors (paid and volunteer) required to include parents and an athletic director/administrator in any communications between coaches/advisors and students/parents? | Yes  No |
| Do employees have unsupervised contact with students? | Yes  No |
| Do volunteers have unsupervised contact with students? | Yes  No |
| Are there procedures prohibiting closed door, one-on-one meetings and counseling? | Yes  No |
| Are volunteers trained in policies and procedures relating to the sexual abuse prevention program? | Yes  No |
| Have there been any claims arising from, or related to, sexual misconduct or sexual abuse in the past five years?  Date of Occurrence:  Amount Paid: $  Explanation of Allegation: | Yes  No |
| Have you terminated any employee or stopped using any volunteer for cause related to sexual abuse in the last 12 months? | Yes  No |
| **If yes**, what procedures have you instituted or changed to reduce the chances of another occurrence? |  |
| Does the district offer an anonymous reporting tool?  **If yes**, what service do you utilize? | Yes  No |
| Does your district have an individual responsible for sexual abuse prevention that reports to a member of administration? | Yes  No |