



ROTARY INTERNATIONAL

District 6270

Continuing Support of the District Youth Protection Policy Rotary Club Statement of Compliance

District 6270 is committed to creating and maintaining the safest possible environment for all participants in Rotary youth activities. It is the duty of all Rotarians, Rotarian's spouses, partners, and any other volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of children and young people with whom they come into contact.

Each Rotary Club is responsible to review the District 6270 Youth Protection Policy and the Reporting Guidelines (appendix B), to implement these guidelines in your Club Youth Activities Programs, and to complete the following statement of compliance. This statement should be signed and dated by the Club President for this coming July 1st Rotary year. This form should be completed at PETS.

The Rotary Club of _____

All clubs must have background checks done for all that will be working with youth in any activity, if there is a volunteer affidavit on file you can submit a list of the members you want approved, otherwise submit a new affidavit for each new person along with a check for \$3.15 for each background check requested. This information must be submitted to the District office by June 15, 2010. All background checks are valid for one year.

It should be understood by all clubs that for the annual youth exchange program we are a part of **Central States Rotary Youth Exchange Program, Inc.** as such we adhere to the policies and procedures set forth by that organization The Central States organization is authorized by the U. S. Department of State to issue a certificate of eligibility to enable students to obtain a J-1 visa to attend high school in the U.S. for one year. This was in the Federal Register 62.25 as amended. In order to continue the program Rotary must adhere to the requirements set forth in that section. Should you have any question about this contact the District Youth Exchange Chair.

As the 2010 -11 Club President for the Rotary club shown above this coming July 1, I herby certify that we will operate our program in accordance with District & RI policy. This form must be completed each year by the incoming president for each club; it is only valid during that year.

Club President _____ / _____ / _____
Print Name Sign Name Date

Address: _____

Phone: _____ Email: _____

Please list here your club youth activities chair if known: _____
If your club has no youth activities please check here.

District 6270 Office: c/o Sandra Shultz; 10405 W Manor Park Drive; West Allis, WI 53227-1219