



Safeguarding Team Appointment

(Congregation, School, or other Organization)

(City)

As head of the organization named above, I have reviewed the qualifications described in **Forming a Local Safeguarding Team** and believe the following person(s) to be well-qualified for the designated positions. Subject to the appointee(s) meeting the training and certification requirements of the Safeguarding Office, I make the following appointment(s) to the Safeguarding Team.

As **Safeguarding Records Administrator (SRA)**:

Name and email address

Name and email address

As **Safeguarding Coordinator**:

Name and email address

Name and email address

As **Trainer** for ____ Safeguarding God's Children and/or ____ Safeguarding God's People:

Name and email address

As **Trainer** for ____ Safeguarding God's Children and/or ____ Safeguarding God's People:

Name and email address

Signature: _____, _____

Title

Date: _____