Diocese of Jackson

Protection of Children Program
VIRTUS Initial Training Report

Trainer Name _____

Location of Training _____

Date of Training_____

Print Name	Signature	Ministry	Ministry Site

Trainer Signature _____ Date _____

Trainer phone number _____
Original copy should be kept on file at Parish/School/Center/Ministry Site
Copy should be forwarded prior to October 31st to:
Diocese of Jackson
Office of Protection of Children
P. O. Box 2248, Jackson, MS 39225-2248
Fax: 601/812-5743 email: vickie.carollo@jacksondiocese.org