

OFFICE OF CHILD AND YOUTH PROTECTION
Roman Catholic Church of the Diocese of Baton Rouge
Transfer of Documents Form

I _____ hereby authorize the transfer of the following information

Employee/Volunteer from my Child Protection profile:

___ Background Check

___ Code of Ethics Acknowledgement

___ Certificate of Child Protection Training

___ EAPPS Application

___ Addition of _____ as a secondary site location in EAPPS System.

My current primary site is _____ (Diocesan Institution).

Other (describe below):

Please list the corresponding diocesan institutions below ONLY if transferring primary locations:

Transferring from: _____

Transferring to: _____

Authorization Date: _____

Signature: _____

This form is to be maintained permanently in the Child Protection file for this applicant.