

**APPENDIX C**  
**COVENANT**

By my signature below, I acknowledge each of the following to be true:

- I have received a copy of Solon Center Wesleyan Church “Church’s Guidelines for Child Protection”.
- I have read and understand the contents of these Guidelines.
- I have participated or will participate in training regarding these Guidelines.
- I understand that it is the Church’s policy that if I have a reportable suspicion of child abuse, according to the laws of this State, I should immediately do the following:
  - Inform Supervisor of my suspicion; AND
  - Report the suspected abuse to the appropriate civil authority; AND
  - Follow up with a written report to the civil authorities within 24 – 48 hours of the verbal report, as and if required by law; AND
  - Cooperate with Civil Authority investigating this matter; AND
  - Cooperate fully with the Supervisor, as requested.

I agree to comply with the procedures set forth in Solon Center Wesleyan Church's Guidelines for Child Protection.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name