

**Clergy Agreement for Informed Supervision of Sex Offender's  
Attending Worship Services**

Supervisee's Name: \_\_\_\_\_

Clergy Supervisor's Name: \_\_\_\_\_

I/We have read and will comply with the Responsibilities and Duties of Informed Supervisors.

I will make a personal contact with this supervisee each time I see him at a church function.

I will inform the appropriate leadership of the church to insure that the children and young adolescents of our church family are safe.

I will not permit this supervisee to function in any role in the church that would put him in contact with anyone under the age of 18.

I will enforce the conditions of this supervisee's probation as outlined in "Standard Sex Offender Conditions of Supervision" paying special attention to condition #4.

I will report any concerns that I have to this supervisee's probation officer.

Name: Title: \_\_\_\_\_

Church: \_\_\_\_\_

Address : \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone/Cell /Fax \_\_\_\_\_

Email: \_\_\_\_\_

Signature of Clergy Supervisor: \_\_\_\_\_

Signature of Supervisee: \_\_\_\_\_

Signature of Probation Officer: \_\_\_\_\_

Date approved: \_\_\_\_\_

Other persons in the church that are serving as informed supervisors:

(Note: This would include laypeople and/or other clergy who have been told about the supervisee's sex offender status, guidelines for supervision, conditions of probation and need for informed supervision. These people have accepted the responsibility to serve as informed supervisors as indicated by their signature below).

Please print their name and give their phone number here and have them sign beneath their name.

By signing you are accepting the responsibilities listed for informed supervisors.

1.

2.

3.

4.

5.