

SAFEGUARDING ADMINISTRATIVE CHANGE NOTICE

College Missions / Organizations / Parishes / Schools

Date: _____

Location: _____ **City:** _____

Name: _____ **Email:** _____

Head of Mission / Organization / School (HOS)

Prior HOS: _____ Leave date: _____

New HOS: _____ Start date: _____

Safeguarding Records Administrator (SRA)

Prior SRA: _____ Leave date: _____

New SRA: _____ Start date: _____

Safeguarding Coordinator (SC)

Prior SC: _____ Leave date: _____

New SC: _____ Start date: _____

Safeguarding SGC Trainer (SGC or SGP-E)

Prior SGC Trainer: _____ Leave date: _____

New SGC Trainer: _____ Start date: _____

Prior SGP Trainer: _____ Leave date: _____

New SGP Trainer: _____ Start date: _____

Email completed form to the [Safeguarding Office](#) along with a [SRA Recommendation form](#) or [Safeguarding Coordinator form](#) as needed.

Questions? Email [Marty Brickley](#), Safeguarding Certification Manager

Safeguarding Office use only

Received by:

Affiliations Updated: