****

**Service Agreement - Schedule 2**

**SCOPE OF AUDIT STATEMENT**

**Religious Institutes**

**Societies of Apostolic Life**

Please complete this form for all ministries, organisations and activities under the governance of the named Church Authority.

Prior to audits against the National Catholic Safeguarding Standards (NCSS), Australian Catholic Safeguarding Ltd (ACSL) needs an understanding of the scope and profile of Catholic entities.

This Scope of Audit Statement is intended to capture information regarding all related or affiliated organisations and ministries under the governance authority of the named Church Authority.

Should you have any queries with regard to this Audit Statement or the ACSL Audit Program, please contact **Tania Stegemann, Director of Compliance, 1300 603 411,** tania@acsltd.org.au.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Church Authority** |  | | |
| **Name and Title of Church Authority Leader** |  | | |
| **Street Address of Church Authority** |  | | |
| **Church Authority Trading Name** |  | | |
| **Church Authority ABN** |  | **Is the Church Authority a member of the Catholic GST Religious Group?** | Yes 🞏  No 🞏 |
| **Does the Church Authority have any current and/or historical complaints of child sexual abuse made against any entities for whom s/he has governance responsibility?** | | | Current 🞏  Historical 🞏  N/A 🞏 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INSTITUTE** | | | | | |
| Number of offices (administration) |  | | Number of administrative staff |  | |
| Functions of administrative offices (e.g. finance, HR, legal, property, maintenance, etc) |  | | | | |
| Number of Religious Communities |  | | | | |
| Number of Religious Institute Members |  | In Active ministry | | |  |
| Retired (no formal ministry but may still do volunteer work) | | |  |
| Inactive (e.g. in care) | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location of communities / ministries / Members | *# of Members* | | *# of Members* | |
| Australian Capital Territory |  | New South Wales |  |
| Northern Territory |  | Queensland |  |
| South Australia |  | Tasmania |  |
| Victoria |  | Western Australia |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Does the Church Authority have Members ministering in Australia who have been transferred into the Religious Institute from overseas? | Yes 🞏  No 🞏 | If yes, list number of Members and countries of origin |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Does the Church Authority have operations/ministries outside of Australia (where the Church Authority has governance responsibility)? | Yes 🞏  No 🞏 | If yes, list:   * Countries * Number of Religious Members ministering in these countries * Nature of ministry |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Does the Church Authority oversee candidates in formation/formation programs? | Yes 🞏  No 🞏 | If YES, how many candidates are currently in formation/formation programs? |  |
| Is this formation delivered within Australia? | Yes 🞏  No 🞏 | If YES, how many candidates? |  |
| Is this formation delivered outside of Australia? | Yes 🞏  No 🞏 | If YES, please list locations outside of Australia and how many candidates in each |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Does the Church Authority have a governance role or oversight of a Theological College? | Yes 🞏  No 🞏 | If YES, what is the name and location of the Theological College *(include all details for multi-campus colleges)* |  |
| Number of staff |  | Number of students |  |

|  |  |  |
| --- | --- | --- |
| Does the Church Authority have canonical governance of any other religious institutes, societies of apostolic life or associations of Christ’s faithful? | Yes 🞏  No 🞏  N/A 🞏 |  |
| If YES, please provide details for each group (name, number of members, number of locations, etc) |  | |

Please answer the following questions for the service organisations/agencies which are governed by the Church Authority. For each service organisation related to your entity, provide as much detail as possible and include the sector/client group(s) to whom they provide services.

| **SERVICE AGENCIES/ORGANISATIONS** | | | | |
| --- | --- | --- | --- | --- |
| ***Education*** Yes 🞏 No 🞏 N/A 🞏 | | | | |
| Number of Primary schools |  | Number of staff | Central office |  |
| Number of Secondary schools |  | School-based |  |
|  | | Number of volunteers | |  |
| Describe the governance arrangements in place between the Church Authority and the education provision  (e.g. Board of governance reports to Provincial; education services governed by Ministerial PJP, etc) |  | | | |
| ***Social/Welfare*** Yes 🞏 No 🞏 N/A 🞏 | | | | |
| Number of locations/offices/service outlets |  | Number of staff | |  |
| Number of volunteers | |  |
| Description of services – please describe service types, modes of service delivery, etc (e.g. counselling; foster care; youth services; child care; family law services; NDIS; office-based; outreach; helpline) |  | | | |
| Describe the governance arrangements in place between the Church Authority and this ministry (e.g. Provincial is member of the Board; Board reports to provincial; separately incorporated entity owned by Religious Institute; etc) |  | | | |
| ***Health/Aged/Disability*** Yes 🞏 No 🞏 N/A 🞏 | | | | |
| Number of locations/offices/service outlets |  | Number of staff | |  |
| Number of volunteers | |  |
| Description of services – please describe service types, modes of service delivery, etc (e.g. acute care, public/private facilities, specialist target groups, etc) |  | | | |
| Describe the governance arrangements in place between the Church Authority and this ministry (e.g. Provincial is member of the Board; Board reports to provincial; separately incorporated entity owned by Religious Institute;) |  | | | |
| **REPEAT AS NECESSARY FOR ANY OTHER SERVICE AGENCIES (disability, childcare, early childhood, aged care, health, etc)** | | | | |
| ***Name of Service*** |  | | | |
| Number of locations/offices/service outlets |  | Number of staff | |  |
| Number of volunteers | |  |
| Description of services – please describe service types, modes of service delivery, etc (e.g. acute care, public/private facilities, specialist target groups, etc) |  | | | |
| Describe the governance arrangements in place between the Church Authority and this ministry (e.g. Provincial is member of the Board; Board reports to provincial; separately incorporated entity owned by Religious Institute etc) |  | | | |
| ***Name of Service*** |  | | | |
| Number of locations/offices/service outlets |  | Number of staff | |  |
| Number of volunteers | |  |
| Description of services – please describe service types, modes of service delivery, etc (e.g. acute care, public/private facilities, specialist target groups, etc) |  | | | |
| Describe the governance arrangements in place between the Church Authority and this ministry (e.g. Provincial is member of the Board; Board reports to provincial; separately incorporated entity owned by Religious Institute) |  | | | |
| ***Name of Service*** |  | | | |
| Number of locations/offices/service outlets |  | Number of staff | |  |
| Number of volunteers | |  |
| Description of services – please describe service types, modes of service delivery, etc (e.g. acute care, public/private facilities, specialist target groups, etc) |  | | | |
| Describe the governance arrangements in place between the Church Authority and this ministry (e.g. Provincial is member of the Board; Board reports to provincial; separately incorporated entity owned by Religious Institute) |  | | | |

Please provide contact details below for any follow up in relation to the information provided in this Statement.

|  |  |
| --- | --- |
| **Name** |  |
| **Job Title** |  |
| **Contact Telephone** |  |
| **Contact Email** |  |