

How does one create an account in the VIRTUS System?

Before completing the *Protecting God's Children* training Online, all participants must first register with VIRTUS Online.

Go to <http://www.virtusonline.org>

On the left side of the screen, click **First-Time Registrant**, to begin registration.



To proceed, click on **Begin the registration process**.

We do not offer live training sessions.



From the dropdown menu, **Select, Tulsa, OK (Diocese)** as your organization.

(Scroll all the way down past the St. locations)

Choose the "No" button to create a new account. If you have an account, STOP and notify your school or parish local administrator to give you access to your account.

Create a user ID (use a valid email) and a password you can easily remember. This establishes your account with the VIRTUS program. We suggest the use of email addresses as usernames so that announcements and renewal notices may be sent to you.

Click **Continue** to proceed.

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VIRTUS[®]Online

If you already have a VIRTUS Account, you may reset your password or recover your user ID here: **RECOVER ACCOUNT**
or you may contact the Helpdesk at helpdesk@virtus.org or 888-847-8870.

Please create a user id and password that you will use to access your account

Common names like Mary and John are not good choices as they are most likely already in use.
Common abbreviations like 'smith' and 'mjones' are also likely to already be in use.
We suggest using your full name (without spaces) or email address as they are more likely to be unique.

Create a User ID:

Create a Password:

Your user id is case sensitive. We recommend that you use all lower case letters and avoid spaces and punctuation. Email addresses are ok. Your user id must be at least 4 characters long.

Your password must be at least 8 characters long.

[Important note about selecting passwords](#)

Provide all the information requested on the screen.

Several fields are required, such as: First, Middle & Last Name, Email address, Home Address, City, State, Zip, Phone Number

and Date of Birth.

(Note: Do not click the back button or your registration will be lost.)

Click **Continue** to proceed.

If you do not have an email address, consider obtaining a free email account. This is necessary for your VIRTUS Coordinator to communicate with you. If you cannot obtain an email address, enter: noaddress@virtus.org.

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Please provide the information requested below

DO NOT CLICK THE BACK BUTTON OR YOUR REGISTRATION WILL BE LOST

Please enter your name as it appears on your driver's license, passport or other government-issued ID, and we need your full, legal name.

Salutation:

First Name:

Full Middle Name:

Last Name:

Nickname:

Suffix:

Email:

Home Address:

Home Address Cont'd:

City:

State:

ZIP/Postal Code:

Daytime Phone:

Ext:

Evening Phone:

Date of Birth:

* Required field
* One field in this group is required

Select the PRIMARY location where you work or volunteer by clicking the downward arrow and highlighting the location.

Note: This should be the location requesting your background check

Click **Continue** to proceed.

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Please select the primary location where you work or volunteer.

Location:

Select the role(s) that you serve within your diocese and/or parish. Please on select roles you are currently performing.

Select Educator ONLY if you are an OK Licensed Catholic School teacher.

Additionally, enter your title or function in the box provided [which best describes your role(s)] -- ie. Catechist, Coach, Deacon, DRE, Eucharistic Minister, Math Teacher, Priest, Room Mom, Seminarian, etc).

Click Continue to proceed.

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Please select the primary location where you work or volunteer.

Location:

Please check all that apply. You must select at least one role.

Please select at least one primary role you perform at this location

☐ **Employee (Parish/Parochial)**
This is for Parish and/or non-teacher School employees, Directors of Religious Education Secretaries Coordinators of Youth Ministry Support staff

☐ **Employee (Diocesan/Eparchial)**
Bishop Kelly Calvary Cemetery Cascia Hall Catholic Charities Monte Cassino San Miguel School

☐ **Volunteer**
Any unpaid person who is expecting to be regularly engaged in ministry with access to children or vulnerable adults Catechists- teachers of religion, Nursery workers Leaders and helpers of various youth organizations associated with the Diocese or any parish, such as scouts, campfire, athletics groups and choirs.

☐ **Priest**
Incardinated priests Non-incardinated Priests Religious Priests

☐ **Deacon**
Only those men who have been ordained to the Order of Deacon and serve in that capacity with the Diocese of Tulsa. This also includes retired Deacons.

☐ **Candidate for ordination**
Seminarians, candidates for the seminary and diaconate aspirants.

☐ **Educator**
CATHOLIC SCHOOL TEACHERS ONLY and substitute teachers in the Catholic Schools of the Diocese of Tulsa who are licensed by the Oklahoma State Department of Education, i.e. Salaried teachers, principals and administrators. This role is NOT for Catechists or Parish Religion Educator staff (they should use the volunteer role or "employee-parish/parochial" role).

Please select any additional roles you perform at this location

☐ **Independent Contractor**
Vendor

If you have a title please enter it below.
If you do not have a title, please briefly describe what you do.

Title or Position of Service:

Continue

Your selected location is displayed on the screen.

Select YES, if you need to add secondary/additional locations.

(Follow instructions in previous step to select additional locations.)

Otherwise, if your list of locations is complete, select NO.

This is the list of locations with which you are associated:

All Saints Catholic School (Broken Arrow)

Do you work, volunteer or worship in another location?

Answer the YES/NO questions.

Click Continue to proceed.

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Are you a parent or guardian of a child under 18?

☐ Yes
☐ No

Do you interact with, work with or come into contact with minors of this archdiocese/diocese/religious organization?

☐ Yes
☐ No

Do you interact with, work with or come into contact with vulnerable adults of this archdiocese/diocese/religious organization?

☐ Yes
☐ No

Do you manage, supervise or oversee employees or volunteers on behalf of this archdiocese/diocese/religious organization in any capacity?

☐ Yes
☐ No

Continue

Please **review** Policies & Procedures for the Protection of Children & Young People.

Please **check the box**, indicating that you have read and understand the Policies & Procedures for the Protection of Children & Young People. **Type your name and date**. Click **Continue** to proceed

Please **review** Code of Ethics Agreement.

Please **check the box**, indicating that you have read and understand the Code of Ethics Agreement. **Type your name and date**. Click **Continue** to proceed.

Please **review** the Quick Reference Guide: Reporting Procedures.

Please **check the box**, indicating that you have read and understand the Quick Reference Guide: Reporting Procedures. **Type your name and date**. Click **Continue** to proceed.

Please **review** the Volunteer Waiver.

Please **check the box**, indicating that you have read and understand the Volunteer Waiver. **Type your name and date**. Click **Continue** to proceed.

Select "I need to apply for a background check and access the VIRTUS Online Training"

Complete your background check prior to completing your training. You must return to the VIRTUS screen after your background investigation application is complete, in order to do so.

Avoid bypassing the background check or stopping in process or you may need to ask your local administrator to prompt the background check again. This will delay your clearance.

COMPLETE Background Check COMPLETELY

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VIRTUS[®]Online

Diocese of Tulsa

Background Check Required?

Please indicate if a background check is required.

☐ I need to apply for a background check and access the VIRTUS Online Training.

☐ I only need to access the VIRTUS Online Training.

Please **review** and answer all questions of the *Diocese of Tulsa Background Questionnaire Concerning Sexual Misconduct*

Acknowledgement

By clicking the button below, I certify that the facts contained in this Questionnaire are true and complete to the best of my knowledge and understand that falsified statements shall be grounds for dismissal. I authorize investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing same to you.

To proceed, **click** on the box containing the following statement: **Acknowledge and proceed to background check.**

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Diocese of Tulsa

Background Questionnaire Concerning Sexual Misconduct

These questions are in addition to your background check.

Answers to all questions are required.

Do not disclose answers previously reported to diocese on a prior background questionnaire. Do not disclose any convictions that have been sealed or expunged, including juvenile records. Disclosure of criminal history will not automatically disqualify you from consideration. Each case will be judged on its own merits based on the job relatedness, nature, and severity of the conviction and how long ago it occurred in compliance with the Policies & Procedures for the Protection of Children & Young People of the Diocese.

Have you ever been convicted of a crime of sexual misconduct, of physical sexual misconduct, sexual harassment or exploitation?	<input type="radio"/> Yes <input type="radio"/> No
Have you ever been convicted of any other crime?	<input type="radio"/> Yes <input type="radio"/> No
Has any allegation or civil or criminal complaint ever been made against you relating to sexual misconduct, sexual harassment or exploitation or physical sexual misconduct?	<input type="radio"/> Yes <input type="radio"/> No
Have you ever terminated your employment or had your employment terminated for reasons relating to allegations of sexual abuse, sexual harassment or exploitation by you, or relating to civil or criminal complaints for sexual or physical sexual misconduct brought against you by others?	<input type="radio"/> Yes <input type="radio"/> No
Have you ever received any medical treatment, physical or psychological, for reasons involving sexual misconduct, sexual harassment or exploitation with a minor or adults?	<input type="radio"/> Yes <input type="radio"/> No
Is there anything in your past that the Church should be aware of, in order to make a sound decision regarding your relationship as an employee or volunteer with the Church and the safety of youth and young adults?	<input type="radio"/> Yes <input type="radio"/> No

Acknowledgement

By clicking the button below, I certify that the facts contained in this Questionnaire are true and complete to the best of my knowledge and understand that falsified statements shall be grounds for dismissal. I authorize investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing same to you.

Even if you have attended a VIRTUS Protecting God's Children Session, **choose NO**.

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Have you already attended a VIRTUS Protecting God's Children Session?

☐ YES ☐ NO

You must complete a new training every 5 years.

Select the Online Training language you need, click in the appropriate circle for either English –or– Spanish.

Click Complete Registration to proceed.

You will see the Background check screen next.



To complete a Background Check,

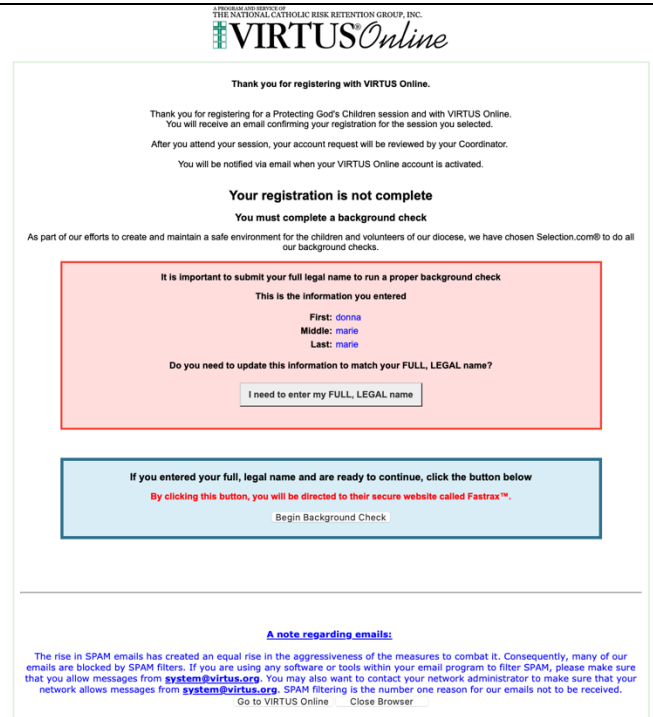
Verify your full legal name before proceeding. Update if needed.

Select Begin Background Check You must complete the background check all the way until submission.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

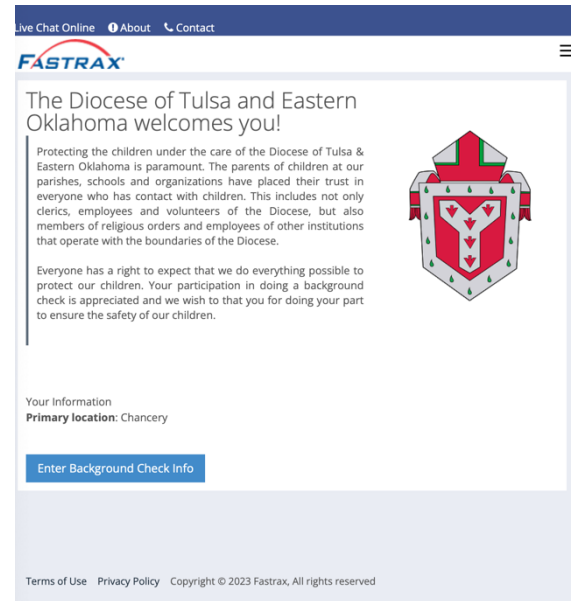
This link will direct you to Selection.Com *FASTRAX* secure website.

When you are done with CYP requirements, make sure to allow emails from system@virtus.org.



Select, Enter Background Check Button to begin.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

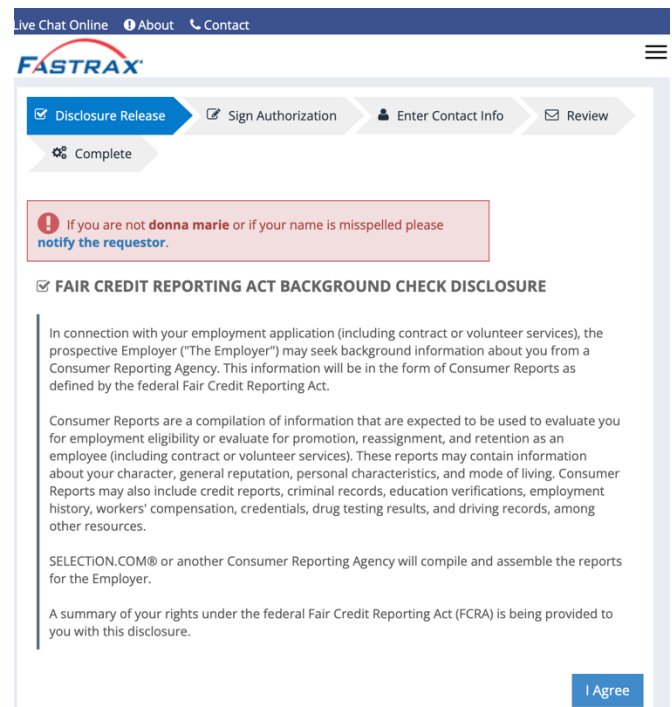


Please **review** the Fair Credit Reporting Act Disclosure

Click I Agree to continue

Please review the application Authorization.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.



Please **review** the Summary of your rights.

Click the Acknowledgement box, then the button Next to continue.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

Live Chat Online About Contact

FASTRAX

Disclosure Release Sign Authorization Enter Applicant Info Review

Complete

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

Para información en español, visite www.consumerfinance.gov/learnmore o escriba a la Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your

[Download](#) a copy of this document.

☐ I acknowledge my consumer rights as outlined above.

Back Next

Please review the application Authorization

Click I Accept box, then the button Next to continue.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

Live Chat Online About Contact

FASTRAX

Disclosure Release Sign Authorization Enter Applicant Info Review

Complete

AUTHORIZATION TO OBTAIN CONSUMER REPORTS UNDER THE FAIR CREDIT REPORTING ACT

I acknowledge that I have received and read the *Fair Credit Reporting Act Background Check Disclosure, A summary of Your Rights Under the Fair Credit Reporting Act*, and this authorization. I certify that I understand the documents I have received.

I hereby authorize The Employer or its authorized agents, for employment purposes (including contract or volunteer services), to obtain Consumer Reports after The Employer receives this authorization, including any time during that I may be employed by The Employer.

I hereby authorize law enforcement agencies, public and private schools, federal, state, and local agencies and courts, credit bureaus, information bureaus, current and former employers, financial institutions, licensing agencies, governmental agencies, the military, and other individuals and entities to provide any and all information that is requested by SELECTION.COM®, other consumer reporting agencies, or The Employer.

I understand that any information that I provide in an employment application or that I otherwise disclose during my employment (including contract or volunteer services) may be used to obtain Consumer Reports.

Donna Marie

By selecting "I Accept" using any device, means, or action, you agree your electronic signature is the legal equivalent of your manual/handwritten signature on this document.

☐ I Accept

Back Next

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Select your current State of residence.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

The screenshot displays the FASTRAX application interface. At the top, there is a navigation bar with links for 'Live Chat Online', 'About', and 'Contact'. Below this, the FASTRAX logo is visible. A progress bar indicates the current step is 'Sign Authorization', with other steps being 'Disclosure Release', 'Enter Applicant Info', and 'Review'. A red error message box states: 'Please select your current state of residence from the list provided below.' Below this, the section 'ADDITIONAL STATE DISCLOSURES' is shown, with a note that disclosures may vary by state. A dropdown menu for 'Current state of residence:' is present, currently showing '(please select)'. A 'Back' button is located at the bottom left of the form area.

To proceed with your Background Check, enter all requested applicant information into the designated fields.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

To proceed with your Background Check, enter all requested applicant information into the designated fields.

You will not be able to return to the application if you stop at any point during it. You will need to call the location to reset the application if you do.

Review all information on the screen for accuracy.

To **make corrections**, click **Back**.

Select the check box to receive a copy of your results emailed to you.

When information is verified, correct and complete, **click** on the red **Submit Request** button on the bottom of page.

Live Chat OnlineAboutContact

FASTRAX

Disclosure ReleaseSign AuthorizationEnter Contact InfoReview

CompleteNext

PERSONAL IDENTIFICATION

Last Name

marie

First Name

donna

Middle Name

Birth Last Name

SSN

Ex: 100-XX-XXXX

DOB

Ex: mm/dd/yyyy

10/24/1965

PHONE/EMAIL

Email

Ex: abc@xyz.com

noaddress@virtus.org

Phone

(918) 307-4919

Ext

Type

Cell

Best Time to Reach Applicant

NOTES

Please enter any other information that will help us with the verification check.
(other spellings of your name, other last names, nicknames, etc.)

Next

Gender

Unknown

Race

ADDRESS

Number

Ex: 1234

Street Name

Ex: Broadway

Type

Ex: Ave

Address Line 2

(Unit No., Route, PO Box, etc.)

Zip

Ex: 10000

74014

City

Broken Arrow

State

OK - Oklahoma

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Contact Information

APPLICANT

donna marie

Last Name: marie

First Name: donna

SSN:

DOB:

Race:

Address:

Email:

Phone:

Phone Type: Cell

CONTACT NOTICES

REQUESTING A COPY OF YOUR BACKGROUND CHECK

If you would like a copy of your completed report, check the box below and provide your email address. A copy of your report will be sent to you.

You may review any reports by calling 800-325-3609 between the hours of 8am - 5pm Eastern Time.

☐ By checking this box, I request to receive a free copy of any consumer report ordered on me.

Please review your request info before submitting. To make changes, use the back buttons on this page.

[Back](#)

[Submit Request](#)

Do not forget to return to the VIRTUS website to complete your training.

Select the blue link in the current training box.

Logout

A MEMBERSHIP AND SERVICE UNIT OF THE NATIONAL CATHOLIC RISK RETENTION GROUP, INC.

VIRTUS^{Online}

Home Message Center

donna marie
Diocese of Tulsa, OK

Current Training

You have 1 online module assigned

Required Documents

Your documents are current

Contacts

Your primary contact
Donna Eurich
donna.eurich@dioceseoftulsa.org

My Info

Your primary location
Chancery (Broken Arrow)
Your primary role
Volunteer

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Return to VIRTUS Online and access your *Protecting God's Children* training.

Click on the green circle to begin the Online Training

Online Training Courses

To begin your online training, please click the title of your assigned training:



Protecting God's Children® Online Awareness Session 3.0

Assigned: 10/09/2018

Due: 10/23/2018



Past due



Due date approaching



Assigned