

Before completing awareness training online, all participants first register with **VIRTUS Online**. Please click on the VIRTUS link to access the VIRTUS Registration page:

https://www.virtusonline.org/virtus/reg_2.cfm?theme=0&org=38018

Or, please register by going to www.virtus.org and click on 'First Time Registrant' and selecting the **Diocese of Saint Petersburg** from the dropdown menu.



Create a user ID and a password you can easily remember. This is necessary for all participants. This establishes your account with the VIRTUS program. If your preferred user ID is already taken, please choose another ID. We suggest the use of email addresses as usernames.

Click **Continue** to proceed.

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](#) or call 888-847-8870.



ROMAN CATHOLIC DIOCESE OF SAINT PETERSBURG
COURAGEOUSLY Living the Gospel

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

1. Create a user ID - it must be 4 or more characters, and it is case sensitive.
2. Create a password - it must be 8 or more characters, and it is case sensitive.

Create a User ID:
Create a Password:

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, and Phone Number.

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

Click **Continue** to proceed.

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: Please select -
First Name: *
Full Middle Name:
Last Name: *
Nickname:
Suffix: Please select if applicable -
Email: *
Home Address:
Home Address Confir:
City:
State: Select - *
ZIP/Postal Code:
Daytime Phone: (555-555-5555)
Ext:
Evening Phone: (555-555-5555)
Cell Phone: (555-555-5555)
Last 4 digits of SSN: why? *
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.

Click **Continue** to proceed.

Please select the primary location where you work or volunteer.

Location: - Please select -

Your selected location(s) are displayed on the screen.

Please select from the role/description that applies to your position.

Additionally, enter your title in the box provided that best describes your role within your location.

Click **Continue** to proceed.

Please select the primary location where you work or volunteer.

Location: ALL SAINTS CATHOLIC CHURCH (CLEARWATER)

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
☐ Volunteer
☐ Priest
☐ Deacon
☐ Candidate for ordination

Please select any additional roles you perform at this location

- ☐ Contractor/Vendor

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

Title or Position of Service:

Please select **Yes** if you are associated with any additional locations, or please select **No** to continue.

You have chosen following locations and roles:

ALL SAINTS CATHOLIC CHURCH (CLEARWATER)
 • Volunteer ✓

Are you associated with any other locations?

Yes

No

Please answer the questions.

Click **Continue** to proceed.

Do you interact with, work with or come into contact with minors of this organization?

☐ Yes
☐ No

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

☐ Yes
☐ No

Continue

Please review the following document on the screen and respond:

➤ Diocese of Saint Petersburg Policy for the Protection of Children and Vulnerable Adults

To proceed and acknowledge each document, please **Confirm** by clicking on: "I have read and understand this document." and enter your full name and today's date.

Click on **Continue**.

Diocese of Saint Petersburg
 Policy for the Protection of Children and Vulnerable Adults

1 / 8 49% +

1

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☐ I hereby represent that I have read, and understand this document.

Please provide an electronic acknowledgement to confirm you have received the document above.

Full Name (first, middle, and last): (John D. Smith)

Today's Date: (mm/dd/yyyy)

Continue

Please review the following document on the screen and respond:

➤ Diocese of Saint Petersburg Code of Conduct for Adults

To proceed and acknowledge each document, please **Confirm** by clicking on: "I have read and understand this document." and enter your full name and today's date.

Click on **Continue**.

Diocese of Saint Petersburg
 Code of Conduct for Adults

1 / 2 42% +

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2

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☐ I hereby represent that I have read, and understand this document.

Please provide an electronic acknowledgement to confirm you have received the document above.

Full Name (first, middle, and last): (John D. Smith)

Today's Date: (mm/dd/yyyy)

Continue

If you are an **Employee**, please answer this question. If not, you will skip to the next step.

Do you manage or supervise employees or volunteers in any capacity?

- ☐ Yes
☐ No

[Continue](#)

The next step is to complete your background check.

Click on the link provided to start the process.

Next Step:

Please click on this link to the Diocese of Saint Petersburg BIM site to start the process:

<https://dosp-scheduler.fingerprintlocations.com/landing>

Or if you are an **Employee or Educator at a school** location, please contact the school you are affiliated with.

Next Step:

You are in need of a fingerprint background check.

Please contact the school with which you are affiliated.

They will assist you in scheduling a background check through the Florida Clearinghouse.

[Continue](#)

If you selected an online training, click on the link in the "Current Training" box to complete your online training.

Current Training  You have 1 online module assigned	Contacts  Your primary contact Contact the Local Administrator at your Location	My Info  Your primary location ACADEMY OF THE HOLY NAMES (TAMPA) Your primary role Employee
Reporting Abuse  Click here for reporting options	Resources  Minimum Standards of Moral Conduct	

Click on the **green circle** or the title of the training course to begin the **Online Training**.

Upon completion, the last screen will allow you to **print** a certificate, and you will always have the ability to log back into your account and access the certificate.

If you have additional questions about VIRTUS Online training, please contact the local administrator at your parish or school.

Online Training Modules

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

-  [Protecting God's Children Awareness Session 4.0 & Vulnerable Adults 2.0 Combined](#)
Assigned: 05/27/2026
Due: 06/10/2026