



MILLCREEK TOWNSHIP SCHOOL DISTRICT VOLUNTEER APPLICATION

Section I: Volunteer Information (Completed by Volunteer – Please print clearly)

Last Name:	First Name:	MI:
Address:	City:	State: Zip:
Email Address:	Cell Phone:	Home Phone:
Emergency Contact:	Relationship to Volunteer:	
Cell Phone of Emergency Contact:	Home Phone:	Work Phone:

Are you an active MTSD employee? Yes or No (Please circle). If yes, building location: _____ if yes, skip to Section IV.
 Are you an active MTSD volunteer? Yes or No (Please circle). If yes, building location: _____ if yes, skip to Section IV.
 ****If you answered yes to either of the above questions, please include a signed disclosure statement with this application.****

Section II: Clearances and Other Requirements

Requirements for General Volunteers:	Requirements for Board Approved Volunteers:
(Volunteers who provide one time, intermittent, or continuous service and are under the direct supervision of a qualified school district employee)	(Volunteers not under direct supervision of a qualified school district employee, overnight chaperones, driving students, or driving district vehicles)
1. Act 24/82 Arrest and Conviction Report/Certification 2. Act 151 - PA Child Abuse History Clearance * 3. Act 34 - PA Criminal Background Check * 4. Act 114 - FBI Federal Criminal History * 5. TB Test - See Below Section III 6. Disclosure Statement Please note: * must be no older than five (5) years Volunteer Policy 916 is available on the district website.	1. Act 24/82 Arrest and Conviction Report/Certification * 2. Act 151 - PA Child Abuse History Clearance * 3. Act 34 - PA Criminal Background Check * 4. Act 114 - FBI Federal Criminal History * 5. TB Test - See Below Section III 6. Disclosure Statement 7. Attach a copy of your Act 126 Training * 8. Driver's License Waiver 9. Drug Test - scheduled by the Personnel Office

Section III: Tuberculosis Test (Completed by Physician)

Board Policy, and as required by the Department of Health, all volunteer applicants are required to have a Tuberculosis test ****no older than three months.****

Date Applied:	Arm:	Method:	Antigen:
Date Read:	Manufacturer:		
Results: (mm):	Signature of Person Administering Test:		
Physician's Signature:		Date:	
For previously known or new positive reactors, please attach a copy of current chest x-ray		Chest X-Ray Date:	

Section IV: Type of Volunteer and Location (Completed by Volunteer)

Please circle one type of volunteer. If you have more than one choice, make a copy of this volunteer application form for each location.		
1. Sports / Booster	What Sport:	Location:
2. Band/Choral/Activity	Which Activity:	Location:
3. Parent / PTA		Location:

Section V: Confidentiality Agreement (Completed by Volunteer)

As a volunteer working in a capacity with access to student information, confidential information may be shared with you, either by a professional at the school or a student. It is important that confidential information not be shared with others unless it is information that reveals a violation of policy or presents an imminent threat to others. In that case, that information should be shared with the building administration immediately. In addition, I agree not to share any personally identifiable information regarding any student under my direct or indirect supervision.

Volunteer Signature

Date

Building Approval (to be completed by Building Principal or Designee)

(Check one): ☐ General Volunteer - This volunteer will be under the direct supervision of a qualified MTSD Employee.
☐ Board Approved Volunteer - This volunteer will not be under the direct supervision of a qualified MTSD Employee.

Building Principal or Designee Signature

Date

ARREST/CONVICTION REPORT AND CERTIFICATION FORM
(under Act 24 of 2011 and Act 82 of 2012)

Section 1. Personal Information

Full Legal Name: _____

Date of Birth: ____/____/____

Other names by
which you have
been identified:

Section 2. Arrest or Conviction

☐

By checking this box, I state that I have NOT been arrested for or convicted of any Reportable Offense.

☐

By checking this box, I report that I have been arrested for or convicted of an offense or offenses enumerated under 24 P.S. §§1-111(e) or (f.1) ("Reportable Offense(s)"). See Page 3 of this Form for a list of Reportable Offenses.

Details of Arrests or Convictions

For each arrest for or conviction of any Reportable Offense, specify in the space below (or on additional attachments if necessary) the offense for which you have been arrested or convicted, the date and location of arrest and/or conviction, docket number, and the applicable court.

Section 3. Child Abuse

☐

By checking this box, I state that I have NOT been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

☐

By checking this box, I report that I have been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

Section 4. Certification

By signing this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a Reportable Offense, shall subject me to criminal prosecution under 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Signature

Date

LIST OF REPORTABLE OFFENSES

- **A reportable offense enumerated under 24 P.S. §1-111(e) consists of any of the following:**

- (1) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

<ul style="list-style-type: none"> ▪ Chapter 25 (relating to criminal homicide) ▪ Section 2702 (relating to aggravated assault) ▪ Section 2709.1 (relating to stalking) ▪ Section 2901 (relating to kidnapping) ▪ Section 2902 (relating to unlawful restraint) ▪ Section 2910 (relating to luring a child into a motor vehicle or structure) ▪ Section 3121 (relating to rape) ▪ Section 3122.1 (relating to statutory sexual assault) ▪ Section 3123 (relating to involuntary deviate sexual intercourse) ▪ Section 3124.1 (relating to sexual assault) ▪ Section 3124.2 (relating to institutional sexual assault) ▪ Section 3125 (relating to aggravated indecent assault) ▪ Section 3126 (relating to indecent assault) ▪ Section 3127 (relating to indecent exposure) ▪ Section 3129 (relating to sexual intercourse with animal) ▪ Section 4302 (relating to incest) ▪ Section 4303 (relating to concealing death of child) 	<ul style="list-style-type: none"> ▪ Section 4304 (relating to endangering welfare of children) ▪ Section 4305 (relating to dealing in infant children) ▪ A felony offense under section 5902(b) (relating to prostitution and related offenses) ▪ Section 5903(c) or (d) (relating to obscene and other sexual materials and performances) ▪ Section 6301(a)(1) (relating to corruption of minors) ▪ Section 6312 (relating to sexual abuse of children) ▪ Section 6318 (relating to unlawful contact with minor) ▪ Section 6319 (relating to solicitation of minors to traffic drugs) ▪ Section 6320 (relating to sexual exploitation of children)
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- (2) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."
- (3) An offense SIMILAR IN NATURE to those crimes listed above in clauses (1) and (2) under the laws or former laws of:
 - the United States; or
 - one of its territories or possessions; or
 - another state; or
 - the District of Columbia; or
 - the Commonwealth of Puerto Rico; or
 - a foreign nation; or
 - under a former law of this Commonwealth.

- **A reportable offense enumerated under 24 P.S. §1-111(f.1) consists of any of the following:**

- (1) An offense graded as a felony offense of the first, second or third degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (10) ten years has elapsed from the date of expiration of the sentence for the offense.
- (2) An offense graded as a misdemeanor of the first degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (5) five years has elapsed from the date of expiration of the sentence for the offense.
- (3) An offense under 75 Pa.C.S. § 3802(a), (b), (c) or (d) (relating to driving under influence of alcohol or controlled substance) graded as a misdemeanor of the first degree under 75 Pa.C.S. § 3803 (relating to grading), if the person has been previously convicted of such an offense and less than (3) three years has elapsed from the date of expiration of the sentence for the most recent offense.

INSTRUCTIONS

Pursuant to 24 P.S. §1-111(c.4) and (j), the Pennsylvania Department of Education developed this standardized form (PDE-6004) to be used by current and prospective employees of public and private schools, intermediate units, and area vocational-technical schools.

As required by subsection (c.4) and (j)(2) of 24 P.S. §1-111, this form shall be completed and submitted by all current and prospective employees of said institutions to provide written reporting of any arrest or conviction for an offense enumerated under 24 P.S. §§1-111(e) and (f.1) and to provide notification of having been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

As required by subsection (j)(4) of 24 P.S. §1-111, this form also shall be utilized by current and prospective employees to provide written notice within seventy-two (72) hours after a subsequent arrest or conviction for an offense enumerated under 24 P.S. §§1-111(e) or (f.1).

In accordance with 24 P.S. §1-111, employees completing this form are required to submit the form to the administrator or other person responsible for employment decisions in a school entity. Please contact a supervisor or the school entity administration office with any questions regarding the PDE 6004, including to whom the form should be sent.

PROVIDE ALL INFORMATION REQUIRED BY THIS FORM LEGIBLY IN INK.

MILLCREEK TOWNSHIP SCHOOL DISTRICT CLEARANCE INSTRUCTIONS – VOLUNTEER ONLY

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE INSTRUCTIONS – FREE (every 57 months)

Log on to <https://www.compass.state.pa.us/CWIS>

1. Select **“Create Individual Account”** if you do not have an existing account. Otherwise, select **“Individual Login”** for an existing account to update your clearance.
2. Select **“Next”** if you are creating an individual account.
3. Create your own personal **Keystone ID**. An email will be sent to you with your password. Then return to the home page <https://www.compass.state.pa.us/CWIS> and select **Individual Login** using your **Keystone ID**.
4. Select **“Volunteer Having Contact with Children”** as your **reason for the clearance**. Clearance applications **may take up to 14 days**. You will be able to print a copy of your clearance once it is processed and a copy will be mailed to your home if you requested a copy.

For questions related to the Pennsylvania Child Abuse History Clearance, please contact the CWIS Support Center at 1-877-343-0494.

PENNSYLVANIA STATE POLICE CRIMINAL RECORD CHECK INSTRUCTIONS – FREE

Log on to <https://epatch.state.pa.us>

1. Select **“New Record Check – Volunteers only.”**
2. Provide Volunteer Organization Name – enter **“MTSD,”** name, address, phone number. Continue the completion of the application.
3. A printable certificate will be made available for all **“No Record”** responses. Double click on the control number, then double click on the hyper link, **“Certification Form,”** to print the certificate.
4. **“Under review”** will be updated to **“No Record”** or **“Record”** **within two weeks**. It is the applicant’s responsibility to periodically check the PATCH web site to print the final status.

If you have questions about the Pennsylvania State Police Request for Criminal Record Checks, please call:
1-888-783-7972.

FBI CRIMINAL BACKGROUND CHECK INSTRUCTIONS – FEE \$25.25

The applicant must register prior to going to the fingerprint site. Log on to <https://uenroll.identogo.com/>

1. **Enter Service Code – 1KG6XN. This code is for Pennsylvania PDE School Districts.** This is the only acceptable **code for Millcreek Township School District. Department of Human Services codes are not accepted.**
2. Select **“Schedule or Manage Appointment.”** Proceed through the application: Essential Info, Additional Info, Citizenship, Personal Question, Personal Info, Address, Documents, Location, Date and Time, and Payment.
3. **Please note: If you are a minor under 18 and do not have a PA Driver’s License, PA Identification Card, or U.S. Passport you will need to complete the Photo ID Waiver for Minors form at the fingerprint site.**
4. At the fingerprint site, the applicant will be asked to bring a document such as a current valid state or federal photo ID, (See Identogo’s web site for the list of acceptable documents) and a copy of the Pre-Enrolled registration form. **The FBI Criminal Background Check Process may take up to 14 days for results.**
5. Unofficial results will be sent directly to the applicant. The applicant can make a copy of the “unofficial” results or the Identogo receipt for submission to the School Administrator to review online.

Questions: <https://uenroll.identogo.com/> or 1-844-321-2101

Identogo Enrollment Centers in the Erie Area:

Lake Erie Plaza (Disabled Veteran Solutions) – 2323 West 38th Street, Erie, PA (M-F 8:30 am – 12:00- pm)

Northwest Tri-County IU #5 - 252 Waterford Street, Edinboro, PA

Keystone Research Corporation – 3823 W. 12th St., Erie, PA (M-F 9:00 am – 4:00 pm)

AAA – 6660 Peach St., Unit 2, Erie, PA (M-F 9:00 am – 12:00; 1:00 – 5:00 pm)

REVISED: 4/2/24



Millcreek Township School District

Millcreek Education Center

3740 West 26th Street • Erie, Pennsylvania 16506 • (814) 835-5300



"Building Foundations for Life"

DISCLOSURE STATEMENT APPLICATION FOR VOLUNTEERS

Required by the Child Protective Service Law

23 Pa. C.S. Section 6344.2 (relating to volunteers having contact with children)

I swear/affirm that, if providing certifications that have been obtained within the preceding 60 months, I have not been disqualified from service as outlined below or have not been convicted of an offense similar in nature to a crime listed below under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

I swear/affirm that I have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

I swear/affirm that I have not been convicted of any of the following crimes under Title 18 of the Pennsylvania consolidated statutes or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

Chapter 25	(relating to criminal homicide)
Section 2702	(relating to aggravated assault)
Section 2709.1	(relating to stalking)
Section 2901	(relating to kidnapping) Section
2902	(relating to unlawful restraint)
Section 3121	(relating to rape)
Section 3122.1	(relating to statutory sexual assault)
Section 3123	(relating to involuntary deviate sexual intercourse)
Section 3124.1	(relating to sexual assault)
Section 3125	(relating to aggravated indecent assault)
Section 3126	(relating to indecent assault)
Section 3127	(relating to indecent exposure)
Section 4302	(relating to incest)
Section 4303	(relating to concealing death of child) Section
4304	(relating to endangering welfare of children)
Section 4305	(relating to dealing in infant children) Section
5902(b)	(relating to prostitution and related offenses)
Section 5903(c) (d)	(relating to obscene and other sexual material and performances)
Section 6301	(relating to corruption of minors)
Section 6312	(relating to sexual abuse of children), or an equivalent crime under Federal law or the law of another state.

I swear/affirm that I have not been convicted of a felony offense under Act 64-1972 (relating to the controlled substance, drug device and cosmetic act) committed within the past five years.

I understand that I shall not be approved for service if I am named as a perpetrator of a founded report of

child abuse within the past five (5) years or have been convicted of any of the crimes listed above or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

I understand that if I am arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or am named as perpetrator in a founded or indicated report, I must provide the administrator or designee with written notice not later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the Statewide database.

I understand that if the person responsible for employment decisions or the administrator of a program, activity or service has a reasonable belief that I was arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or was named as perpetrator in a founded or indicated report, or I have provided notice as required under this section, the person responsible for employment decisions or administrator of a program, activity or service shall immediately require me to submit current certifications obtained through the PENNSYLVANIA DEPARTMENT OF EDUCATION, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of certifications shall be borne by the employing entity or program, activity or service.

I understand that if I willfully fail to disclose information required above, I commit a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position.

I understand that certifications obtained for the volunteering purposes can only be used for that purpose and cannot be used for employment purposes.

I understand that the person responsible for employment decisions or the administrator of a program, activity or service is required to maintain a copy of my certifications.

I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name: _____ Signature: _____

Witness: _____ Signature: _____

Date: _____

12/11/17

THIS CLEARANCE IS ONLY NEEDED IF YOU ARE GOING TO BE A BOARD APPROVED VOLUNTEER

Pennsylvania Act 126 Child Abuse Recognition and Reporting

As a requirement of employment, you must provide proof of completion of the 3 hour Mandated Child Abuse Recognition and Reporting training. If you have already received this training, and have proof of completion, we will accept your certificate as long as it is no older than five years from your start date.

The Millcreek Township School District will accept certifications through Safe Schools Training Website or Pennsylvania Child Welfare Resource Center through the University of Pittsburgh. The University of Pittsburgh does offer a free training module. The District is not a member of Safe Schools and for this reason you could be charged a fee for that training. For the University of Pittsburgh website:

Go to www.reportabusepa.pitt.edu

Click on the "Registration" tab.

After registering, you will be assigned a login and password. This should be viewable immediately at the bottom of the registration screen. Write down your login and password for future reference. If you do not see this information on the registration screen, you will need to check your email. You do not need to complete this training in one sitting. (See frequently asked questions.)

If you experience any technical difficulties while taking the course, report them to HelpCPSL@Pitt.edu Please include your name, email, and a thorough description of the problem you are encountering.

Frequently Asked Questions

Where is my Certificate?

If you are having issues printing the certificate, please try the following:

1. If you are using Internet Explorer, try changing your browser to Chrome or Firefox, and reprinting the certificate.
2. If changing your browser is not an option, here are a couple of things to try:
 - a. You will need to go back to the certificate. To do this, go to back to the course website at <http://www.reportabusepa.pitt.edu/> Login and re-launch the course. Under PACWRC Course, click on "Recognizing and Reporting Child Abuse". Click on the dropdown menu next to "Table of Contents" and click on "Completion Check". Click on "Next" until you get to the certificate page. When you are back at the certificate, click on the "Print" button at bottom of screen. On the "General" tab, click on "Preferences". Click on the "Basics" tab and under "Orientation", click on "Landscape".
 - b. Click on "Effects" tab and type 90 in the "% of Normal Size" box. Click on "OK". Click on "Apply" and then "Print".

No Email Confirmation?

Please add helpcpsl@pitt.edu to your "Safe Sender List" in Outlook by clicking on the "Home" tab in Outlook, "Junk", "Junk E-mail Options", click on the "Safe Senders" tab, click on "Add", type helpCPSL.pitt.edu, and click on "OK".

When Can I Print My Certificate?

The certificate will be available to print upon completion of the course. If you need to reprint your certificate, you may log back into the site, re-launch the course, and reprint at any time.

Do I Have to Finish the Course in One Session?

You do not have to complete the course in one session. During any future visits, you will get a pop up message asking if you would like to resume where you left off. Please click on "Okay" and you will pick-up where you ended your session last time.

Where do I send my certificate of completion?

New staff should present their certificate of completion when submitting their other pre-employment paperwork.

Current staff who are renewing their training should send their certificate of completion to the personnel office via email (orsini@mtsd.org), fax, or inter-office mail.