**Federal and State Background Checks and Clearances**

**Step-By-Step Instructions for VOLUNTEER CLEARANCES**

Pennsylvania requires that companies entering into co-op or internship agreements have one adult in the workplace (with volunteer clearances) who will be designated as the supervisor of the student (clearances are needed if the student learner is a minor; no clearances are required for those supervisors working with students at or over age 18).

Clearances are in effect for 60 months (5 years). The designated supervisor must have the following clearances:

Act 114: Federal Criminal History Record (Fingerprinting)

Act 34: Pennsylvania State Criminal Record Check

Act 151: Pennsylvania Child Abuse History Check

Act 114-Federal Criminal History Record (Fingerprinting) – Apply online at

<https://identogo.com>

Waiver: If you have been a Pennsylvania resident for 10 years, you do not need to apply for Act 114 clearances. Instead, please read, sign and submit the “Disclosure Statement Application for Volunteers”(attached as Appendix A).

**The PA Service Code for area technical schools is: 1KG6NX**

Appendix A

DISCLOSURE STATEMENT APPLICATION FOR VOLUNTEERS

Required by the Child Protective Service Law

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

I swear/affirm that I am seeking a volunteer position and AM NOT required to obtain a certification through the Federal Bureau of Investigation (FBI), as:

* The position I am applying for is unpaid; and
* I have been a resident of Pennsylvania during the entirety of the previous ten-year period.

I understand that if I have not been a resident of Pennsylvania during the entirety of the previous ten-year period, but have received certification from the FBI since establishing residency, I must provide a copy of the certification to my employer and am not required to obtain any additional FBI certifications.

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 State wide 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 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 Department of Human Services, 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Act 34 – PA State Criminal Record Check – Apply online at <https://epatch.state.pa.us>

Select ‘New Record Check – Volunteer Only’

Register online at <https://epatch.pa.gov/home>. This clearance can be processed immediately and the certificate printed by you at the time of origination.

Select ‘New Record Check – Volunteer Only’

Complete the Registration

Reason for Request: Volunteer Free

Volunteer Organization Name: Venango Technology Center

Volunteer Organization Phone: 814-677-3097

Click on Control Number

Record Check Details

Certification Form

epatch.state.pa.us

Print the Certificate

Act 151 – PA Child Abuse History Clearance – Apply online at

https://www.compass.state.pa.us/CWIS/

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

Click on ‘Create Individual Account’ to create a profile. Follow the prompts to create a username and password for the CWIS site.

Once a profile has been created, return to the above website and click on ‘Individual Login’. From here, follow the steps to obtain your clearance.

Read the Application Purpose and click the statement that begins ‘Volunteer Having Contact with Children’.

Under volunteer category, click ‘Other’.

Type in agency name: Venango Technology Center

\*Click ‘yes’ for social security number and enter your SSN. There is an option to select ‘no’ but it may extend the time to obtain your clearance results.

\*Click ‘yes’ that you want a paper copy.

\*On the eSignature page, click ‘no’ to verify that you have not received your free volunteer certification since the listed date. Click the affirmation statement. Type your name for the signature.

\*Click ‘no’ to state that you have no authorization code.

The Submission Confirmation includes instructions to check your email for the result of your application.