DIOCESE OF ALLENTOWN OFFICE OF CATHOLIC HEALTH



OFFICE OF CATHOLIC HEALTH,
HUMAN SERVICES, AND YOUTH PROTECTION
OFFICE OF THE SECRETARY
POST OFFICE BOX F
ALLENTOWN, PENNSYLVANIA 18105-1538

SAFE ENVIRONMENT PARISH & SCHOOL VOLUNTEER REQUIREMENTS CHECKLIST

All Volunteers who might have contact with children must have the following:

- 1.Pennsylvania State Police Criminal Record Check (Pennsylvania Access to Criminal History (PATCH)) (Less than one year old, recheck every 5 years) new volunteers please complete PATCH online at: Pennsylvania Access To Criminal History Home (state.pa.us) please click on "New Volunteer Record Check", OR send your completed "Background Authorization Form" to punger@allentowndiocese.org
- 2. Pennsylvania Child Abuse History Certificate (Recheck every 5 years). To obtain the Pennsylvania Child Abuse History Certificate: https://www.compass.state.pa.us/cwis/public/home. A free check is available every 57 months. A free payment code is available through your Local Safe Environment Coordinator (LSEC) or your CYO Representative.
- 3. Federal Bureau of Investigation Criminal "DHS" Background Fingerprint Check (18+ years old) (less than one year old, recheck every 5 years) –payment code is available through your Local Safe Environment Coordinator or your CYO Representative. Register for the fingerprint at https://uenroll.identogo.com with payment code obtained from Local Safe Environment Coordinator (LSEC). During registration, make an appointment for fingerprint scanning at a nearby public site. Print receipt, take it to the appointment and provide receipt to the LSEC. Approximately two weeks after fingerprinting, you will receive the results in the mail. Bring the original document to the Local Safe Environment Coordinator for submission to the Diocese when you receive it.
- 4. Signed Acknowledgment form for 2022 Diocese of Allentown Sexual Abuse Policy which can be reviewed at: https://www.allentowndiocese.org/sites/default/files/2023-01/SexualAbusePolicy2022.pdf
- 5. Signed Acknowledgment form for 2022 Diocese of Allentown Code of Conduct Policy which can be reviewed at: https://www.allentowndiocese.org/sites/default/files/2023-01/CodeofConduct2022.pdf
- 6. Signed Acknowledgment form for 2022 Diocese of Allentown Social Media and Electronic Communications Policy which can be reviewed at: https://www.allentowndiocese.org/sites/default/files/2023-01/SocialMediaPolicy2022.pdf
- 7. Protecting God's Children attendance certificate, only needs to be done once, please see attached directions. Print certificate of completion
- **8. Certificate from Mandated Reporting Training** (good for 5 years) Mandated Reporter Training can be done at www.reportabusepa.pitt.edu. Please see attached directions. Print certificate of completion.
- **9. Acknowledgement Form for Child Protective Services Law (CPSL) Policy.** Review the Diocese of Allentown's Child Protective Services Law Policy (attached) and sign the acknowledgement form.
- 10. Signed Background Check Authorization Form, attached
- 11. Motor Vehicle Report if driving on behalf of a Diocesan location, please fill out part "C" and "E" of the attached "Request for Driver Information Form". Please mail original to Diocese of Allentown Safe Environment Office. PO Box F. Allentown PA 18105-1538
- 12. National Sex Offender Registry Check, must be less than a year old and completed every five years. https://www.dhs.pa.gov/KeepKidsSafe/Resources/Documents/NSOR.APPLICATION.05.02.22.pdf



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Background Check Authorization Form for: Lay Employees, Volunteers, Contactors, & Religious

Have you resided in the State of Pennsylvania for more than a year? Yes No Does position require interaction with children? Yes No	Locatio O O	on Type: Parish School Both	Diocesan I O O O O O O	Position: Contractor Employee Priest Religious Teacher Volunteer
Full Name				O Female
Last	First	Middl		O Male
Alias(es) Last	First	Middle		
Date of Birth: / /				
Mm dd yyyy	Social Se	ecurity Nun		nployees Only
Current Address:				
Street Address			Ap	artment Number
City		State	Zir	o Code
Phone:	Em			
Diocesan LocationSite Name (IE	St. Joseph)		Ci	ity (Bethlehem)
ACKNOWLEDGEMENT SIGNATURE I hereby grant the Diocese of Allentown p social security number verification, FBI f consent to the Diocese following these pre another Roman Catholic Diocese, as neces	permission to c fingerprinting ocedures, mak	complete a Crit and to comple	minal Backgro te a Motor Vel ires and sharii	hicle Check, if applicable. Ing this information with
* Forward completed form to your Local Supervisor, PO Box F, Allentown * Parish /School must retain a copy of the * Fair Credit Reporting Act (FCRA) Sun	PA 18105. is completed for	orm in the emp	tor, or Janice V	-

PLEASE KEEP THESE INSTRUCTIONS FOR REFERENCE

DIOCESE OF ALLENTOWN Instructions to Obtain VOLUNTEER Child Abuse History Certification Clearances

https://www.compass.state.pa.us/csis/public/home

Create and Access an Individual Account

- 1. Use the address above to access the site to apply for a clearance
- 2. You will need to begin the process of applying for a child Abuse clearance by creating an individual account. Click the "Create an Individual Account" button.
- 3. Read the information for creating a Keystone ID on the "Create Keystone ID: General Information" page. Click Next.
- 4. Create a Keystone ID. It can be any user name that you are familiar with for example: lastnamefirstinitialmiddleinitial like "smithab".
- 5. Be sure to write down your chosen questions and the answers exactly. You will need the exact spelling of the answer for future use when asked the questions as a security measure.
- 6. A this point you will receive an email with your Keystone ID (user name). Print this email for your records. You will receive a second email with a temporary password. Copy just the password for your next login.
- 7. Login to the system by clicking "Individual Login" on the home page given above.
- 8. Click "Access my Clearance."
- 9. Use your Keystone ID and the temporary password you received in your email to login to the system.
- Choose a method to verify your identity, either answering security questions or receiving a verification code at your email address.
- 11. Answer "What type of device are you using?" with one of the following options:
 - a. "Public" as in a public device like one that might be at a library or a school
 - b. "Private" as in a private device that you own
- 12. Set a permanent password and write it down for your records. Close the window.
- 13. Login to the system (web address above) again using your Keystone ID and the permanent password that you have set.
- 14. Once you have logged in, you will be taken to the "My Child Welfare Terms and Conditions" page. Read through it and then select "I have read, fully understand and agree to the My Child Welfare Account Terms and Conditions" box at the bottom of the page and click "Next."
- 15. Click "Continue."

PLEASE KEEP THESE INSTRUCTIONS FOR REFERENCE

Applying for a Child Abuse History Certification

- 16. Click "Create a Clearance Application."
- 17. Click "Begin."
 - a. Employees of a parish must select "Individual 14 years or older applying for or holding a paid position as an employee with a program, activity or service."
 - b. Employees of a school (either new hire or looking to update clearances) must select "School employee governed by the public school code."
 - c. Please note: volunteer clearances cannot be used for employment.
- 19. Enter all requested information. Make sure to include a local address that you have access to, so that you can receive a mailed copy of your results in addition to an electronic copy, if so desired.
- 20. Be sure to include your social security number that you can receive your results in a timely manner. Applications without a social security number provided can take more time to return results.
- 21. When you are listing the people you have lived with, please be sure to include your parents, even if you have not lived with them in the last 25 years. This will prevent the application from being kicked back for insufficient information.
 - a. All applicants who were under 18 years of age in 1975 must list their parents or guardians among their Household Members.
 - b. Those who have passed can still be listed. You can note this rather than giving an age.

22. If you received a payment code (See label below), please enter it when asked to do so.				

23. Once you have completed the application click "Submit." Make a note of the application number that shows at the end.

Next Steps:

You should receive an email that your application was received. You will also receive an email when your clearance is ready to access online. If you requested to receive a paper copy in the mail, that should arrive within 2 or 3 weeks, as long as the information you provided was accurate to the best of your knowledge and complete to the satisfaction of ChildLine.

If your application resulted in a letter requesting missing information, you may respond to this either by writing the information on the letter and mailing it back to ChildLine (address at the end of the letter), or you may call the ChildLine Verifications Unit using the phone number on the letter to provide the missing information.

PLEASE KEEP THESE INSTRUCTIONS FOR REFERENCE

DIOCESE OF ALLENTOWN

Instructions to Obtain DHS Fingerprints for all Volunteers and Parish Employees

Go to the registration site: https://uenroll.identogo.com/

Enter your Service Code to get started

Volunteer – 1KG6ZJ for DHS Volunteer

Employee - 1KG756 for DHS Employee

Select Schedule or Manage Appointment.

During registration:

- You will be required to enter your personal information.
- Information marked with a red asterisk (*) is required.
- To receive a copy of your receipt by email, you must enter your email as your preferred form of contact. If you do not enter an email, no receipt will be sent to you.
- You will be asked to fill in Employee Information, please enter

Employee Name: Diocese of Allentown

Country: United States
Address Line 1: PO Box F
Address Line 2: - leave blank-

City: Allentown

State: Pennsylvania Postal Code: 18105-1538

You will be asked if your mailing address is the same as your residential address, please select NO
 When the mailing address comes up, please enter, PO Box F, Diocese of Allentown, Allentown
 PA. 18105. Please enter your home address in the residential address area.

Payment Code

- You will be asked to enter your authorization/coupon/payment code (included on above label). The first 5 digits of the code should correspond to the service code that you used to start the registration process (in yellow above).
- Once you have finished entering your information, you can choose a fingerprint location by zip code. Select an appointment time and schedule your fingerprints.
- Print a copy of the confirmation to take with you to fingerprinting appointment AND for your records.
- At the time of your appointment, you will receive a printed receipt, please give a copy to your location, keep the original for your files.
- An official copy of your results will be sent to your email address if you selected to be contacted through
 email. Please do not open on your phone. Your unofficial results are only available once, through a
 one-time use link. Do NOT login with your phone because the system doesn't allow letters pulled via
 mobile devices, but it does count as your single login. Only use the link provided by IdentoGo when you
 are on a computer and have the ability to save and print it. Please keep this copy (either from email or
 regular mail) for your records.

PLEASE KEEP THESE INSTRUCTIONS FOR REFERENCE

ACKNOWLEDGMENT/CERTIFICATION DIOCESE OF ALLENTOWN POLICIES AND PROCEDURES REGARDING SOCIAL MEDIA AND ELECTRONIC COMMUNICATIONS

I acknowledge and certify that I have received or have been given access to the Diocese of Allentown's Policies and Procedures Regarding Social Media and Electronic Communications. I understand that the Diocese of Allentown may amend or modify these Policies and Procedures from time to time in its sole discretion.

I further acknowledge and certify that it is my responsibility to carefully read these Policies and Procedures and to abide by and comply with them at all times. My signature below acknowledges and certifies that I have either read the Policies and Procedures Regarding Social Media and Electronic Communications or have attended a training presentation conducted by the Diocese of Allentown explaining these Policies and Procedures, as well as my responsibility to comply with them.

I acknowledge and certify that I have had an opportunity to ask questions with respect to the Policies and Procedures Regarding Social Media and Electronic Communications and have been made aware of who to contact in the event that I have any future questions or concerns in this regard.

Date	Signature of Clergy/Religious/Employee/Volunteer
Location	Printed Name



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ACKNOWLEDGMENT/CERTIFICATION DIOCESE OF ALLENTOWN POLICIES AND PROCEDURES REGARDING 2022 CODE OF CONDUCT

I acknowledge and certify that I have received or have been given access to the Diocese of Allentown's Policies and Procedures Regarding Code of Conduct. I understand that the Diocese of Allentown may amend or modify these Policies and Procedures from time to time in its sole discretion.

I further acknowledge and certify that it is my responsibility to carefully read these Policies and Procedures and to abide by and comply with them at all times. My signature below acknowledges and certifies that I have either read the Policies and Procedures Regarding Code of Conduct or have attended a training presentation conducted by the Diocese of Allentown explaining these Policies and Procedures, as well as my responsibility to comply with them.

I acknowledge and certify that I have had an opportunity to ask questions with respect to the Policies and Procedures Regarding Code of Conduct and have been made aware of who to contact in the event that I have any future questions or concerns in this regard.

Date	Signature of Clergy/Religious/Employee/Volunteer
Location	·
Printed Name	

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ACKNOWLEDGMENT/CERTIFICATION DIOCESE OF ALLENTOWN 2022 POLICIES AND PROCEDURES REGARDING ALLEGED SEXUAL ABUSE

I acknowledge and certify that I have received or have been given access to the Diocese of Allentown's Policies and Procedures Regarding Alleged Sexual Abuse. I understand that the Diocese of Allentown may amend or modify these Policies and Procedures from time to time in its sole discretion.

I further acknowledge and certify that it is my responsibility to carefully read these Policies and Procedures and to abide by and comply with them at all times. My signature below acknowledges and certifies that I have either read the Policies and Procedures Regarding Alleged Sexual Abuse or have attended a training presentation conducted by the Diocese of Allentown explaining these Policies and Procedures, as well as my responsibility to comply with them.

I acknowledge and certify that I have had an opportunity to ask questions with respect to the Policies and Procedures Regarding Sexual Abuse and have been made aware of who to contact in the event that I have any future questions or concerns in this regard.

Date	Signature of Clergy/Religious/Employee/Volunteer
·	
Location	
Printed Name	



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Code of Conduct, English



Sexual Abuse Policy, English



Social Media Policy, English



Code of Conduct, Spanish



Sexual Abuse Policy, Spanish



Social Media Policy, Spanish





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Instructions to Obtain PGC Certificates

Protecting God's Children Program (PGC)

The Protecting God's Children[™] program is a virtual training that includes videos and question and answer segments. All clergy, employees, or volunteers who interact with children are required to attend. Currently Protecting God's Children is once and done.

- 1. Please visit https://www.virtusonline.org/virtus/
- 2. Select the "First-Time Registrant" button
- 3. Select Begin the registration process"
- 4. Using the dropdown arrow select "Allentown, PA (Diocese)"
- 5. Click "yes or no" if you have previously registered with Virtus. Select "No" if you are not sure.
- 6. Create a username and password, please keep these for future trainings
- 7. <u>Please fill in all *items.</u> Do not select "No Email," you must have an email address to do the virtual training.
- 8. Please select the primary location you will be volunteering/employed

Please select at least one primary role you perform at this location Please select any additional roles you perform at this location Please enter your actual title or position of service

- 9. Select "Yes" if you are associated with any other diocesan locations, "No" if you are not.
- 10. Please answer the four questions on the next page, by selecting "Yes" or "No"
- 11. Please print and read the documents on the next page, select "I have read and understand this document", fill in your mane and the date, select continue.
- 12.On the next page Select "Online Training" or "Online Spanish Training," then click the "Continue Button"
- 13. Have you already attended a VIRTUS Protecting God's Children Session? select "Yes" or "No"
- 14. If you selected "No" please select the training you'd like to take (English or Spanish).
- **15.** Your home page will open, please click on <u>You have 1 online module assigned</u>, to start your training.
- **16.** Thank you for registering for Virtus Online, you will receive an email with the required reading material within five business days.
- **17.** Upon completion, please print or take a picture your certificate and give to your supervisor or Local Safe Environment Coordinator.



OFFICE OF CATHOLIC HEALTH, HUMAN SERVICES, AND YOUTH PROTECTION OFFICE OF THE SECRETARY POST OFFICE BOX F ALLENTOWN, PENNSYLVANIA 18105-1538

Instructions to Obtain Mandated Reporter Certificates

Mandated Reporter Training

The Recognizing and Reporting Child Abuse: Mandated and Permissive Reporting in Pennsylvania Online Training course is available online. All clergy, employees, or volunteers who interact with children are required to attend. Mandated Reporter Training expires every 5 years. Please keep you login information for future trainings.

- 1. Pa Family Support Alliance website: https://pafsa.org/
 - a. Click on "Trainings & Programs" at the top of the page
 - b. Select "Mandated Reporter Training"
 - c. Scroll down the page until you see
 - "Upcoming Virtual Sessions at no cost"
 - d. Look for Virtual Sessions in (month), (click here)
 - d. Select a date and time that works for you
 - e. Fill in all the required boxes marked with * (an asterisk)
 - f. Select "Register"
 - g. You will receive an email with information and the Zoom link. The timeline varies with each instructor.
 - h. Upon completion, please print or take a picture of your certificate and give to your supervisor or Local Safe Environment Coordinator.

2. University of Pittsburgh's website:

https://www.reportabusepa.pitt.edu/PublicStudentSignUp.aspx

- a. Fill out all required information (blue fields) to create an account.
- b. Click "Submit" to create a username and password.
- c. Login using your new credentials in the "Welcome" tab.
- d. Complete the 3-hour (minimum) training course.
- e. Upon completion, please print or take a picture of your certificate and give to your supervisor or Local Safe Environment Coordinator.



Child Protective Services Law

All persons (including volunteers) who come into contact with children at any time in the course of their work <u>are considered mandated reporters of child abuse</u> and are required by State Law to report to law enforcement authorities all cases of suspected child abuse.

Any person who willfully fails to report child abuse commits a crime and is subject to prosecution.

Persons having reasonable cause to suspect that a child has been subjected to child abuse, or acts of child abuse, shall report immediately to the following:

· If you suspect a child is in imminent danger from abuse,

PLEASE CALL 911 IMMEDIATELY.

- Please call the Child Abuse Hotline (24-hour): 1-800-932-0313
- Please also complete the CY 47 form available from the County Children & Youth Services. It is to be filed within 48 hours of your call. The form is available for completion online at www.compass.state.pa.us/cwis or you may fax or mail the form to the appropriate Office of Children and Youth.
- Please call the Appropriate Office of Children and Youth Services:

Berks	610-478-6700	Bucks	215-348-6950
Carbon	570-325-3644	Luzerne	570-826-8710
Lehigh	610-782-3064	Monroe	570-420-3590
Northampton	610-829-4690	New Jersey	877-652-2873
Schuylkill	570-628-1050	Montgomery	610-278-5800

- The Pastor (or Board of Pastors of the Regional School)
- The Principal of the school
- Attorney Joseph A. Zator at 610-432-1900; please forward a copy of the CY-47 to Attorney Zator.
- If abuse occurs in a school setting, there may be additional reporting requirements. Please see your Principal. If the suspected perpetrator is the Principal, then see your Pastor, or the Superintendent of Education for the Diocese.

**Please document who you spoke to and when

Anyone making a report is immune from civil or criminal liability provided a report is made in good faith.

The Diocese of Allentown urges any questions about the interpretation of the law be resolved in favor of reporting.

Revised 05/25/2018



FLOW CHART FOR MANDATED REPORTERS (Call 911 if the child is in imminent danger)

To make a report:

CALL ChildLine 1-800-932-0313

AND

Complete CY-47:

Form (PDF) can be found online at:

www.keepkldssafe.pa.gov

Click on Resources and then Forms. Click on "Report of Suspected Child Abuse (CY-47) to print form.

Complete all information on CY-47 as far as you are able. There may be questions you are not able to answer. Please mail or fax the CY-47 within 48 hours to the Local County Office of Children & Youth as directed.

OPTION -Electronic Reporting:

You may also complete the CY-47 and submit online at

www.compass.state.pa.us/cwis/public/home

You are required to create a Keystone ID in order to submit an electronic report. Complete all information on form as far as you are able. There may be questions you are not able to answer. A confirmation of the submittal will be sent by email. Please print a copy of the report before you exit the website.

Notes:

Keep copies of all your correspondence and a record of to whom you spoke. Contact Pam Russo, Secretary for Catholic Health, Human Services, and Youth Protection with questions about the reporting process at prusso@allentowndiocese.org or 610-871-5200, ext. 2204.

Inform person in charge:

Pastor, Board of Pastors, Principal, Administrator, Secretary of Secretariat

Call/Fax Local Children & Youth

Agency After calling Childline, you have 48 hours to mail or fax a copy of the CY-47 to the Local County Office of Children & Youth

Call Attorney Joseph Zator

Email, Mall or fax the copy of CY-47 to Atty. Zator

Attorney Joseph Zator 4400 Walbert Ave. Allentown, PA 18104 Jzator@zatorlaw.com (p) 610-432-1900, (f) 610-432-1707

Within 30-60 days, you should receive a letter from the Local County Office of Children & Youth that reports findings.

Email, Mail or fax copy of letter received to Atty. Zator



DIOCESE OF ALLENTOWN Child Protective Services Law Policy Acknowledgment Form

I hereby acknowledge that I have received a copy of the Diocese of Allentown's Child Protective Service Law Policy.

I have reviewed the Child Protective Services Law Policy and understand its contents, and the process that I must complete if I have reasonable cause to suspect that a child has been subjected to child abuse or acts of child abuse.

I further understand that the Diocese of Allentown has issued the Child Protective Services Law Policy for informational or guidance purposes only and that the Diocese does not intend for the Policy to create a contract or any type of binding obligation on the Diocese. The Diocese of Allentown may periodically review the Child Protective Services Law Policy, and it reserves the right to amend or interpret the Policy as it deems appropriate in its sole discretion. A copy of this acknowledgment form shall be placed in my personnel or volunteer file.

(Date)	(Signature of Employee/Volunteer)
	(Please print name)
Location (Parish/School/Office)	City

_ A_TTTTL_IZT_A_TTIZTAL AI4	45 D O FC 1	Registry Verification
MPPIN MINING	HODSI SOVII PROBABI	· WAATOPM! MANIPIONSIAN
**** *******************************	uondi oga ongilugi	TREATERING VEHICLESHIPS

The following individuals must complete the National Sex Offender Registry verification application:

- Any individual 18 years or older residing in the child care setting where child care is occurring.
- · Any individual working for a Regulated Child Care Provider.
- Any individual with an ownership interest (corporate or non-corporate) in a Regulated Child Care
 Provider and who participates in the organization and management of the operation.
- Any volunteer of a child care provider, group day-care home or family child care home.

Type or print clearly in ink. Fill in all necessary fields on the application. Once completed, use one of the following three options to submit the application for processing:

- 1. Mail to the Clearance Verification Unit, ChiidLine at the following address: Department of Human Services PO Box 8170 Harrisburg, PA 17105-8170; **OR**
- 2. Scan the completed application and email to: <u>RA-PWNSOR@pa.gov</u> In the subject line list 'NSOR Verification Applicant Last Name (i.e., Smith); **OR**
- 3. Hand deliver to the Clearance Verification Unit lobby located at: 5 Magnolia Drive, Harrisburg, PA 17110 (Hillcrest Building number 53). Free parking is available in Lot C.
 - Processing time is fourteen days from the date the application is received.
 - Retain a copy of the completed application for your record. You may need a copy as proof of your submission for your employer.
 - · There is no fee for the National Sex Offender Registry verification letter.
 - Refer all questions to the Clearance Verification Unit at 877-371-5422.

Purpose of the National Sex	Offender Registry Verification (Check one box only)	
Individual working for a Regulated C ☐ Individual with an ownership interest and who particlpates in the organization ☐ Volunteer of a child-care provider, gr	(corporate or non-corporate) in a Regulated Child Care and management of the operation. Toup-daycare home or family child care home.	Provider
Applicant Demo	ographic Information (All fields required)	
Full Name (Last, First, Middle Initial):		
Social Security Number (XXX-XX-XXXX):		
Date of Birth (MM/DD/YYYY);		
Daytime Phone Number (XXX-XXX-XXXX):		
Home Mailing Address:		
•	include full street address, (Apt # or PO Box if applicable),	
	City, State and Zip Code	
F 9 A.M		

I affirm the above information is accurate and complete to the best of my knowledge and belief, and submitted as true and correct

Date: __

under penalty of law per Section 4904 of the Pennsylvania Crimes Code.