



**Prospective Volunteer Name**

**Date**

## Pine-Richland School District Independent Volunteer Application Packet

Pine-Richland School District has hundreds of board-approved volunteers who collaborate with our students and staff each year to make a positive impact on learning inside and outside the classroom. Our district is so thankful for the time that you and others have offered in support of our students. This application packet contains all necessary forms and directions in order for you to become eligible to serve as an Independent Volunteer.

### Independent Volunteer Application Steps and Checklist

#### **Step 1: Volunteer Application Packet Completion**

Complete and submit this independent volunteer application packet, clearances, and related documentation to the District Office Secretary via email at [acercone@pinerichland.org](mailto:acercone@pinerichland.org)

<b>Your complete application packet must contain:</b>	
Contact Information	
Tuberculosis Test (TB test dates within 3 months of today's date)	
<a href="#">FBI Criminal History Clearance (Fingerprints) (subject to renewal every 5 years)*</a>	UEID:
<a href="#">PA Criminal History Clearance (subject to renewal every 5 years)*</a>	
<a href="#">PA Child Abuse Clearance (subject to renewal every 5 years)*</a>	
<a href="#">Mandated Reporter Training Certificate</a>	
Act 24 Arrest & Conviction form	
<a href="#">Acknowledgment, Certification, &amp; Release Authorization Form</a>	

*\*Instructions for obtaining and submitting your clearances are provided on page 2 of this packet. Per Board Policy #916, all clearances must be dated within the past 60 months (5 years) and are subject to renewal every 5 years*

#### **Step 2: Packet Review/Approval**

The Human Resource Department will review all Independent Volunteer applications. Once the packet is satisfactorily complete, the volunteer will be notified and their recommendation will be placed on the board agenda at an upcoming school board meeting for approval.

### **Step 3: ID Badge Issuance**

Once approved, the school(s) in which you are planning to volunteer will receive notification of your approval. The Independent Volunteer will receive an email from the District Office Secretary to schedule an appointment to receive their ID badge, which are required to be worn at all times when volunteering. ID badges are done on Wednesdays from 1-3pm or by appointment. Please contact Abby Cercone [acercone@pinerichland.org](mailto:acercone@pinerichland.org) or 724.625.7773 x6307.

### **Contact Information for Prospective Volunteer**

**Name:**

**Address:**

**City/Town:**

**State:**

**Zip:**

**Telephone Number:**

**Email Address:**

**School(s) you intend to volunteer:**

**Please note:** *If your contact information changes following your board approval as an independent volunteer, please contact Abby Cercone [acercone@pinerichland.org](mailto:acercone@pinerichland.org) or 724.625.7773 x6307.*

### **Tuberculosis (TB) Skin Test Information**

**Administrator Name:**

**Date & Time:**

**(Initial Visit)**

**and**

**(Screening)**

Please provide documentation from the provider's office which reflects your negative results following your second visit. **Please note that TB tests must be dated within the past three (3) months.**

## Clearance Information Sheet

### FBI Criminal History Check

***Please use the website for this clearance, not the fingerprint card by mail.***

<https://uenroll.identogo.com>

- Fee required
- Login using Service Code: 1KG6XN
- Go to **Schedule or Manage Appointment** and complete the online form to register for an appointment.
- The staff at the location will perform the fingerprint scan and provide you with a receipt containing a Universal Enrollment ID (UEID). On page 1 of this application packet, please provide the district with your UEID so HR can retrieve your results.

### Pennsylvania Criminal History Check

***Please use the website for this clearance, not the printed form.***

<https://epatch.pa.gov/home>

- Free for volunteers
- Go to "New Record" and follow the instructions through to the certification page. Search Results Table appears, click on the Control Number (write down the control number for future reference). The record check details page will be opened - click on the Certification Page to access and print your clearance. The Record Check Details page is only a receipt and not acceptable as a clearance.
- Print 2 certification pages, keep one for yourself and submit the other to the district.

### Pennsylvania Child Abuse Certification

***Please use the website for this clearance, not the printed form.***

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

- Free for volunteers
- Create an account or log in if you already have an account, and complete the online application. You will be able to retrieve your results through your online account once they are available.
- Print 2 copies of your certification page, keep one for yourself and submit the other to the district.

### Mandated Reporter Training

[www.reportabusepa.pitt.edu](http://www.reportabusepa.pitt.edu)

- Free for volunteers
- You will only need to complete this training once.
- This training course is a 3 hour presentation about recognizing and reporting child abuse.
- Print 2 copies of your certificate, keep one for yourself and submit the other to the district.

**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

## 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.**

## 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"> <li>▪ Chapter 25 (relating to criminal homicide)</li> <li>▪ Section 2702 (relating to aggravated assault)</li> <li>▪ Section 2709.1 (relating to stalking)</li> <li>▪ Section 2901 (relating to kidnapping)</li> <li>▪ Section 2902 (relating to unlawful restraint)</li> <li>▪ Section 2910 (relating to luring a child into a motor vehicle or structure)</li> <li>▪ Section 3121 (relating to rape)</li> <li>▪ Section 3122.1 (relating to statutory sexual assault)</li> <li>▪ Section 3123 (relating to involuntary deviate sexual intercourse)</li> <li>▪ Section 3124.1 (relating to sexual assault)</li> <li>▪ Section 3124.2 (relating to institutional sexual assault)</li> <li>▪ Section 3125 (relating to aggravated indecent assault)</li> <li>▪ Section 3126 (relating to indecent assault)</li> <li>▪ Section 3127 (relating to indecent exposure)</li> <li>▪ Section 3129 (relating to sexual intercourse with animal)</li> <li>▪ Section 4302 (relating to incest)</li> <li>▪ Section 4303 (relating to concealing death of child)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Section 4304 (relating to endangering welfare of children)</li> <li>▪ Section 4305 (relating to dealing in infant children)</li> <li>▪ A felony offense under section 5902(b) (relating to prostitution and related offenses)</li> <li>▪ Section 5903(c) or (d) (relating to obscene and other sexual materials and performances)</li> <li>▪ Section 6301(a)(1) (relating to corruption of minors)</li> <li>▪ Section 6312 (relating to sexual abuse of children)</li> <li>▪ Section 6318 (relating to unlawful contact with minor)</li> <li>▪ Section 6319 (relating to solicitation of minors to traffic drugs)</li> <li>▪ Section 6320 (relating to sexual exploitation of children)</li> </ul>
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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.

PINE-RICHLAND SCHOOL DISTRICT

**ACKNOWLEDGMENT, CERTIFICATION AND RELEASE AUTHORIZATION**

I have read and reviewed Board Policy #916. I acknowledge and understand that the position for which I am applying is an unpaid position, and that the position will not become a paid position at any time during this assignment. I further acknowledge and agree that I must obtain and provide my Act 34, Act 114 and Act 151 clearances to the Pine-Richland School District in order to provide services to students, and that my signature on this application represents my authorization for the District to receive and/or obtain these reports. I further acknowledge and understand that I am required to comply with all policies established by the District's Board of School Directors during my volunteer assignment.

I certify that all of the statements made by me are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that any falsification or misrepresentation of information on this Application by me shall be sufficient cause for: (1) rejecting my candidacy, (2) withdrawing of any offer of volunteer work, or (3) terminating my volunteer position.

I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my personnel records, and to respond fully and completely to all questions that officials of the Pine-Richland School District may ask regarding my prior work history and performance. I will hold such previous employers and/or supervisors harmless of any and all claims that I might otherwise have against them with regard to statements made to this school district. I further authorize these officials to investigate my background, now or in the future, to verify the information provided and release from liability all persons and/or entities supplying information regarding my background. However, I do not authorize the production of medical records or other information, which would tend to actually identify a disability nor do I authorize inquiries which would include information related to any medical condition or medical history. Further, I do not waive any rights which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information, whether by the school district or by entities or persons providing such information to the school district, including any and all claims concerning allegations of employment discrimination because of race, color, sex, religion, national origin, ancestry, age or disability.

*Pennsylvania school districts shall not discriminate in their educational programs, activities or employment practices based on race, color, national origin, sex, disability, age, religion, ancestry or any other legally protected classification. This policy is in accordance with state and federal laws, including Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990 and the Pennsylvania Human Relations Act. Information relative to special accommodation, grievance procedure, and the designated responsible official for compliance with Title VI, Title IX, and Section 504 may be obtained by contacting the school district.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date