Danville Head Start Pre-K

Volunteers

Thank you for your interest in volunteering for Danville Head Start Pre-K!

Volunteers provide a valuable service and are important members of the Head Start Pre-K team!

CLEARANCES AND OTHER REQUIREMENTS

Anyone who volunteers must obtain or complete the following:

- ☐ **Volunteer Confidentiality Agreement** (Page 2)
- ☐ **Standards of Conduct** (Page 3)
- ☐ **PA State Police Criminal History Clearance** (Page 4)
- ☐ **FBI Criminal History and Fingerprinting** (Page 5)
- ☐ **PA Child Abuse History Clearance** (Page 6)
- ☐ **Act 24 Reporting Arrests and Convictions** (Page 7 and the included form)
- ☐ **Tuberculosis Screening** (Page 8-9)
- ☐ **Orientation with Danville Head Start Pre-K staff**

If you are in need of assistance printing your clearances, please reach out to your Family Advocate or call 570-271-3268 ext 3700.



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CONFIDENTIALITY AGREEMENT

DIRECTIONS: Read the following carefully, initialing the box by each statement to indicate your understanding. Your signature at the bottom of this form indicates you will abide by Danville Head Start Pre-K's Confidentiality Agreement.

- ☐ I will respect the privacy of all DHSPK staff and clients.
- ☐ I will not participate, listen, or repeat gossip about DHSPK staff or clients.
- ☐ I will only share information on a "need to know" basis.
- ☐ Information I share will be objective and tactful.
- ☐ I will safeguard confidential written information.
- ☐ I will secure appropriate releases prior to sharing information.
- ☐ I will not discuss confidential information with or in the presence of children, parents, students, volunteers, substitutes, bus drivers, personal care aides, or others not specified by a release of information.
- ☐ I will not discuss staff or clients with my family, friends, or in the community.
- ☐ If at any time I have questions, I will seek out my supervisor <u>before</u> sharing information.

I have read, understand, and agree to abide by Danville Head Start Pre-K's Volunteer Confidentiality Agreement at all times. I understand violation of the Volunteer Confidentiality Agreement is a major offense, subject to disciplinary action including termination of volunteer capabilities.

_____ _____

Volunteer Signature Date

DANVILLE HEAD START PRE-K
STANDARDS OF CONDUCT

Danville Head Start Pre-K's staff, consultants, contractors, and volunteers must abide by the program's standards of conduct. Read and initial the box by each statement to indicate your understanding. If you have any questions, please ask your immediate supervisor or director of the program.

☐ I will provide high quality services in accordance with all applicable rules and regulations, including the federal Head Start Performance Standards, PA Pre-K Counts Regulations, Danville Head Start Pre-K Program Operations Manual, and the Danville Area School District Board Policies

☐ I will use positive strategies to support children's well being and prevent and address challenging behaviors

☐ I will not engage in behaviors that maltreat or endanger the health or safety of children, including, at a minimum,

- Corporal punishment, physically abusive behavior, defined as intentional use of physical force that results in, or has the potential to result in, physical injury. Examples include but are not limited to, hitting, kicking, shaking, biting, pushing, restraining, force feeding or dragging
- Sexually abusive behavior, defined as any completed or attempted sexual act, sexual contact, or exploitation. Examples include, but are not limited to, behaviors such as inappropriate touching, inappropriate filming, or exposing a child to other sexual activities
- Emotionally harmful or abusive behavior, defined as behavior that harm a child's self worth or emotional well-being. Examples include, but are not limited to, using seclusion, using or exposing a child to public or private humiliation, or name calling, shaming, intimidating or threatening a child
- Neglectful behavior, defined as the failure to meet a child's basic physical and emotional needs including access to food, education, medical care, appropriate supervision by an adequate caregiver, and safe physical and emotional environments. Examples, include, but are not limited to, leaving a child unattended on a bus, withholding food as punishment or refusing to change soiled diapers as punishment

☐ I will report reasonably suspected or known incidents of child abuse and neglect, as defined by the Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C. 5101 note) and in compliance with Federal, State, local and Trival laws

☐ I will respect and promote the unique identity of each individual and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, disability, sexual orientation or family composition

☐ I will comply with program confidentiality policies concerning personally identifiable information about children, family, and other staff members in accordance with program Federal, State, local, and Tribal laws

☐ I will ensure no child is left alone or unsupervised

☐ I will not accept gratuities, favors or anything of monetary value from potential clients

I have read, understand, and agree to abide by Danville Head Start Pre-K Standards of Conduct at all times. I understand violation of the Standards of Conduct is a major offense, subject to disciplinary action up to and including termination.

_____ _____

Signature Date



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PA STATE POLICE CRIMINAL BACKGROUND CHECK

PA State Police Criminal Background Checks are **FREE** for volunteers by visiting:

https://epatch.pa.gov/home

Please follow the directions after clicking the New Record Check button. Please print any documents that generate and submit them with your clearances. If you are in need of assistance with printing, please let us know!

The school is not able to retrieve your information, it must be printed. If you need assistance in printing, please contact us at 570-271-3268 ext. 3700

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IdentoGO

FBI Criminal History and Fingerprinting

To Schedule your ten-minute fingerprint appointment, simply visit

https://uenroll.identogo.com

and enter the following Service Code:

1KG6ZJ

Please bring one of the identification documents from the list below to your enrollment appointment.

- Driver's License issued by a State or outlying possession of the U.S.
- Driver's License PERMIT issued by a State or outlying possession of the U.S.
- ID card issued by a federal, state, or local government agency or by a Territory of the United States ➢ State ID Card (or outlying possession of the U.S.) with a seal or logo from State or State Agency ➢ Commercial Driver's License issued by a State or outlying possession of the U.S.
- Canadian Driver's License
- Department of Defense Common Access Card
- Employment Authorization Card/ Document (I-766) with Photo
- Foreign Driver's License (Mexico and Canada only)
- Foreign passport
- Military Dependent'sIdentification Card
- Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
- U.S. Coast Guard Merchant Mariner Card
- U.S. Military Identification Card
- U.S. Passport
- Enhanced Tribal Identification Card (for federally recognized U.S. tribes)
- U.S. Visa issued by the U.S. Department of Consular Affairs for travel to or within, or residence within, the United States
- Uniformed Services Identification Card (Form DD-1172-2)

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➢ Photo ID Waiver for Minors and U.S. Social Security Card or Birth Certificate

Don't have access to the Internet? You can still schedule an appointment by calling **844-321-2101.**

PENNSYLVANIA CHILD ABUSE HISTORY CERTIFICATION

The PA Child Abuse History Certification is free for volunteers. Please visit the following site to apply for this clearance:

https://www.dhs.pa.gov/KeepKidsSafe/Clearances/Pages/PA-Child-Abuse-History-Clearance.aspx

The clearance will be emailed to you at the address that was noted on the application within 14 days from the date that the application is received in the Childline Verification Unit.

The school is not able to retrieve your information, it must be printed. If you need assistance in printing, please contact us at 570-271-3268 ext. 3700



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REPORTABLE OFFENSE OBLIGATION

Please fill out the attached form (Act 24: Reporting Arrests and Convictions) and sign the following:

I fully understand that:

1. If I am arrested for or convicted of a reportable offense that is listed in **24 P.S. §1-111(f.1** or named as perpetrator in a founded or indicated report, I must provide written notification of the same to the Danville Head Start Pre-K office no later than 72 hours after the arrest, conviction, or notification that I have been listed as a perpetrator.

   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.

2. If there is a reasonable belief that I was arrested or convicted of a reportable offense or was named as a perpetrator in a founded or indicated report, Danville Head Start Pre-K can require me to update my clearances before being permitted to continue to volunteer in the program.

3. Willful failure to disclose this information is a misdemeanor in the third degree.

4. I must renew my clearances prior to the date of expiration.

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Volunteer

Name:_____

Date:_____

Signature of Volunteer: _____

Volunteer Tuberculosis (TB)screening questionnaire

In accordance with Pennsylvania State Regulations, Tb screening must be conducted on a "facility" person (regular volunteer) who serves in a child day care center or Head Start Pre-K classroom. A "regular" volunteer has been interpreted to mean an individual consistently volunteering ***at least 15 hours****.*

Please answer the questions below and return.

TB HISTORY:

1. **Have you ever had a positive TB skin test?**
   Yes **No** **Don't Know**
2. **Have you ever had an abnormal chest x-ray?**
   Yes **No** **Don't Know**

   If yes, how long ago? _____

3. **Have you recently had the mucus you cough up tested for TB?**
   Yes **No** **Don't Know**

   If yes, were you told it was positive for TB? _____

4. **Have you ever been told that you have Infectious Tuberculosis?**
   Yes **No** **Don't Know**

   If yes, how long ago? _____

5. **Have you ever been treated with medication for Infectious TB?**
   Yes **No** **Don't Know**

   If yes, how many medications? _____



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Are you still taking TB medications?

Yes No

Volunteer Tuberculosis (TB)screening questionnaire Continued

6. Do you live with or have you been in close contact with someone who was recently diagnosed with TB?

Yes No Don't Know

8. Have you visited a country with a high prevalence of TB (Asia, Africa, South America)?

Yes No

CURRENT SYMPTOMS:

Do you have a cough that has lasted longer than three weeks?

Yes No

Do you cough up blood or mucus?

Yes No

Have you lost your appetite?

Yes No

Have you lost weight (more than 10 lbs.) in the last two months?

Yes No

Do you have night sweats?

Yes No

Comments:_____

_____

_____