

## How to Apply for Clearances – Volunteer

- Employment Clearances can be used for volunteer purposes.
- Volunteer clearances cannot be used for employment.
- If you have clearances –volunteer or employment that are dated July 1, 2015 or later then you can give a clean copy of these to your Advisory Council Chairman.
- You will renew your clearances every 60 months from the date of the oldest clearance on file (Child Abuse, Patch, or FBI (if needed). For example, if your criminal history is dated August 1, 2015 and your child abuse is dated September 1, 2015, you will need to renew both clearances by August 1, 2020.
- As a volunteer the criminal history and child abuse clearances are free every 57 months.
  
- **FBI Federal criminal history certification:**
  - **Only needed if you have not been a PA resident for at least 10 years.**
  - If needed:
    - Costs 25.75 – must go through Department of Human Services (DHS)
    - Website: <https://www.pa.cogentid.com/index.htm>
    - Once you complete online registration – print form
    - Take form to a fingerprint location – you can get a listing on the website
    - After fingerprinting is completed, you will receive a certification in the mail regarding your criminal history. Give this form to your Advisory Council Chairman to send to Pennsylvania DeMolay.
  
- **PA Criminal History Check(PATCH):**
  - Website: <https://epatch.state.pa.us/Home.jsp>
  - Click on “new record check” Volunteers Only
  - On next page check box that it is for volunteer purposes, then click “accept”
  - On the next page – choose “volunteer” for reason for request.
  - Volunteer Organization Name – Pennsylvania DeMolay
  - Then complete rest of form (this form can be completed by one person, and then on next screen several record checks for various people can be done at once if needed)
  - Click next, on next page, click proceed if all info is correct.
  - On next page – fill in all required information for 1<sup>st</sup> or only applicant. Click enter this request
  - **The same page will pop up again – if you are the only person completing a request, do not fill in the info again, just click “finished”. If another person is completing their request, go ahead and fill in their info. Keep going until all people are applying are finished and then click “finished”**
  - On the next page, you can send request – this should only take a few minutes at most.
  - A page will pop up with your control #, name, date of request, and status.
    - If it says “no record”, click on it and then click on “certificate” and print.
    - If it says “pending” – print that page or write down your control # and check back in a day or two to print certification.
    - Give copy of certification form to your Advisory Council Chairman.

- **Child Abuse Clearance**

- This is the most time-consuming form to complete.
- You will need the following information before you begin:
  - Addresses you have lived at since 1975
  - Name, age, relation of people you have lived with since 1975
  - Please note that if you don't remember the house number, etc just put in as much information as you remember.
- Website: <https://www.compass.state.pa.us/cwis/public/home>
- Please note this is the same website where you would report suspected child abuse using your log in or calling the number on the home page: 1-800-932-0313
- Click on "create individual account"
- You will then go into several steps to create a log in and password. You will need access to your email to complete these steps.
- Just follow along with the instructions on the site and use the help desk phone number if you run into difficulty.
- Click Create Clearance Request
- When it asks your purpose in obtaining a clearance:
  - Click "volunteer"
  - From the drop-down box click "other"
  - Then in 2<sup>nd</sup> box type "Pennsylvania DeMolay"
- This certificate will be available to print within 24-48 hours typically.
- They also mail you a copy.
- If the online version is not possible for you to utilize, you may download, print, and mail the form at this link:  
[http://www.dpw.state.pa.us/cs/groups/webcontent/documents/form/s\\_001762.pdf](http://www.dpw.state.pa.us/cs/groups/webcontent/documents/form/s_001762.pdf)

**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 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 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 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: \_\_\_\_\_