

## District Volunteer Guidelines



"Responsible Caring Citizens serving Responsible Caring Citizens"

Phone: 717-684-2283

www.columbiabsd.org

Fax: 717-681-2220

The Columbia Borough School District provides a learning environment for each student to fulfill his/her highest academic potential. The district, in partnership with the community, will prepare each student to become an independent, life-long learner, and a responsible, caring citizen.

Thank you for your interest in volunteering with the Columbia Borough School District and wanting to assist in preparing our students for the future. As our mission states, our students, employees, and volunteers are life-long learners and responsible, caring citizens. We welcome you to our family.

While with our students and staff, we ask that you show mutual respect and model behaviors that our students respect and emulate. Our children are always watching so our rules must be followed at all times while with them. We are a learning environment, and we welcome you to be part of this learning experience.

The school board and administration sincerely appreciate you for taking the time to give to our children and help to prepare them for the future. If at any time you have questions, concerns, or suggestions, please contact the teacher, principal, or me.

You are very valued in our district and another reason we are "Columbia Proud"!

Respectfully,

Ashley D. Rizzo Superintendent

## **Expectations for Volunteers**

## **Confidentiality as a Volunteer**

Confidentiality is a critical component to being a volunteer in the schools or as a coach. You will hear student conversations, see interactions among students in the classroom, and trust, as a volunteer, will develop. There is an expectation of confidentiality and privacy of information when working as a volunteer with students. Information that students may share with you about their personal or private lives is confidential and is not to be shared. If you hear information that may be considered a threat, or a concern regarding a student's well-being, please talk to the teacher, principal, coach, or supervisor. All volunteers must read and sign a CBSD Confidentiality Agreement before starting as a volunteer.

## **Student Code of Conduct**

Every school has a Student Code of Conduct that is followed by the students and the school. Please be aware of the building procedures where you volunteer. The building office secretary or supervisor can direct you to this resource so you can familiarize yourself with the student and school expectations.

## **Interactions with Students**

As a volunteer working with our students and athletes, you will be viewed as a role model. Your interactions should be friendly, cooperative, and positive. We want you to treat the students with dignity, respect, and courtesy. Show interest in what the students are doing, be encouraging, and smile! Enjoy the time you are giving as a volunteer. Do not share personal information with the students such as your address, phone number, or email address. Please refrain from asking to join a student's personal social media or having a student be part of your personal social media. Do not ask for personal information from students.

You will be working and volunteering among students with many differing beliefs that may be different than you own. It is important that you do not interject your own beliefs or point out to others why their beliefs may be wrong or inappropriate.

Remember, as the students will be watching and learning from you, you will also learn from them!

For the safety of all involved, it is asked as a volunteer that you never be left alone with a student.

## **Verbal Communications with Students**

You may be interacting and talking with individual students, or at times, groups. You are the adult and a role model so what you say and how you say it, matters; they will repeat what you say! Use respectful, uplifting, and appropriate language in the school and on the field.

## Your Role with Student Conduct

There may be a time where you will observe students being disrespectful or disruptive. It may be appropriate to interact, however, how you interact and to what level should be discussed with the classroom teacher, coach, or supervisor. As a volunteer, you should not be disciplining or giving consequences to students. If you observe or witness behavior that it not appropriate or is not safe, it is asked that you bring it to the attention of the teacher or coach. As always, the observations and interactions you have with students and their behavior should not be discussed with anyone other than those who you report to as a volunteer.

## **Reporting Suspected Abuse**

Students may share personal information with you. If a student shares information with you that involves their physical or emotional safety, and you are unsure as what to do with the information or how to respond, bring it to the teacher's or coach's attention immediately. School personnel will follow through with any necessary discussion or contact.

## Interactions with Teachers and Staff

You will not only be among students, but you will have daily interactions with the adults working in the schools. The staff and personnel are appreciative of your willingness to volunteer. Introduce yourself to those who may not know you so they can learn your name and understand where and how you are volunteering. Treat the staff and other adults with the kindness and respect that you also desire. If you have a concern with something you have seen or heard, please address it respectfully with that person individually, not in the presence of students.

During your visit as a volunteer to a school, please be mindful that this is not the time to have a parent teacher conference or to discuss other matters concerning your child. Please schedule a time with your child's teacher so they can give you time to appropriately address your situation.

During your visit to a school, you are asked to remain in the area where you are volunteering. It is asked that you do not visit your child's classroom unless that is where you are volunteering.

During your time volunteering, there may be emergency safety drills or an actual emergency. The students practice fire drills, lockdown drills, and severe weather drills. If you are volunteering during the time a drill or emergency occurs, follow the lead of the teacher and students. Ask the teacher, coach, or supervisor as to what emergency drills you need to be familiar with and what protocols to follow to ensure your safety prior to volunteering so that you feel prepared for an emergency.

## **Tobacco Products**

Please be aware that tobacco products are not permitted in our buildings, on fields, or the campuses.

## **Younger Siblings and Toddlers**

During your time as a volunteer, you will be dedicating your time to assisting and mentoring others. We ask that you make arrangements for your younger children that are not yet in school unless the volunteering opportunity you are participating in allows it or is has been discussed with the teacher, coach, or supervisor prior to your visit.

## **Cell Phones and Posting Social Media**

During your time as a volunteer, you will see students engaged in many interesting and exciting activities. We ask you to please refrain from posting pictures of other students or revealing personal information (including names) of students on social media. Please be aware that some parents have asked that their child not be photographed and not to have pictures placed online or in media outlets.

During your time in the classroom, please have your phone on silent as not to disrupt a lesson. If you must take a call, please be considerate and exit the classroom to have a phone conversation.

## **Doors and Entrances**

We want to provide a safe and secure environment for our students and staff while they are in school. It is imperative that you do not open a door for someone to enter the building or prop a building door open. Everyone entering and leaving the building should go through the office.

## No Solicitation

Students in our schools are a captive audience. Please refrain from engaging the students in any type of solicitation.

## **Transportation of Students**

At no time should you be personally transporting students to and from an activity in your own vehicle. If there is a student that has missed a bus or does not have a way home from an activity, contact the school office, coach, or supervisor. This is to assure the safety of you and the student.

## **Appropriate Dress**

Please dress appropriately according to the type of volunteer service you will be involved with during your time at school. Please check with the teacher, the principal, coach, or supervisor if you have questions regarding what to wear for your volunteer experience.

All volunteers must adhere to CBSD policies, guidelines, and procedures. It will be the discretion of the principal or supervisor to remove a volunteer should violations or disruption occur.

## Your First Day as a Volunteer

## **Parking**

Parking may be limited at certain buildings, so it is recommended that prior to your first day as a volunteer, give the school office a call to verify where the best place is to park.

## **Meeting the Office Staff**

Once you are cleared to be a volunteer, introduce yourself to the secretary and office staff. Do not be offended if you are asked to show identification, as it is a precautionary measure to assure the safety of all in the building. The office staff will be more than willing to direct you where you need to go and answer questions you may have.

## Signing-In and Signing Out

When you come into the building and office area, you will be asked to sign-in before going to your destination to volunteer. When you are done with your volunteer time, please exit through the office area and sign-out.

## **Identification and Volunteer Badges**

Your building will have a volunteer identification badge for you to wear. This identifies you as one of our valued volunteers.

## **District and School Procedures**

As a volunteer you are responsible for being aware of the CBSD School Board policies and the procedures and guidelines of the school where you are volunteering. District policies are available online at <a href="www.columbiabsd.org">www.columbiabsd.org</a>. Individual schools will have their student handbooks posted online as well.

## If You Have A Question

We want you to feel comfortable in your position as a volunteer. If at any time you are unsure of something, need clarification, or have a question, please do not hesitate to ask. You may ask the front office, the teacher, the coach, the principal, or the supervisor where you are volunteering. We welcome your questions and want you to have a valued experience volunteering.

# Appendix Forms and Clearance Information

## What forms and clearances you will need to volunteer in Columbia Borough School District

Thank you for your interest in volunteering in our district! Per School Board Policy 916, the Columbia Borough School District requires ALL volunteers to complete volunteer forms and to provide the standard clearances listed below (exception FBI clearance, see below):

☐ Volunteer Application
☐ PA State Police Criminal History Report
☐ PA Department of Human Services Child Abuse Report
☐ Federal Criminal History Report
(FBI Report from Department of Human Services or Department of Education are acceptable)
o (The Federal Criminal History Report is not required for a volunteer whoprovides a written statement that he or she has been a Pennsylvania resident for the past consecutive 10 years. Use PA Residency Affidavit.)
☐ Volunteer Acknowledgement of Policy #916/Volunteersand Policy #806/Child Abuse
☐ Tuberculosis(TB) Test-If applicable
<ul> <li>See Volunteer Policy 916 and <a href="https://www.health.pa.gov/topics/school/Pages/Tuberculosis.aspx">https://www.health.pa.gov/topics/school/Pages/Tuberculosis.aspx</a></li> </ul>
☐ PDE-6004 Arrest/Conviction Report and Certification Form



## **VOLUNTEER APPLICATION**

Complete this form and submit along with the required clearances and forms to the Building Principal

Applicant Information			
	A1, DI	NT 1	
E	Alternate Pho	ne Number:	
Lilian.			
Skills and Interests (check all that Field Trip	Art Drama	Classroom	
	Athletics Fund Raising	Library	
	Music JA Instructor	Clerical	
Other:			
Additional Details (include specific act	tivities/sports/skills you would like to contr	ibute to the District):	
Are you a parent or relative of a current Columbia Borough School District student?   Student Name Relationship School			
Which building(s) are you planning	to volunteer in? (check all that app	(v)	
	to volunteer in? (check all that app		
	to volunteer in? (check all that app	y)  □ Columbia High School	
	•		
☐ Park Elementary ☐	Taylor Middle School	☐ Columbia High School	
☐ Park Elementary ☐  Signature:	Taylor Middle School	☐ Columbia High School	
☐ Park Elementary ☐  Signature:	Taylor Middle School	☐ Columbia High School	
☐ Park Elementary ☐  Signature:	Taylor Middle School  Superintendent's S	☐ Columbia High School	
□ Park Elementary □  Signature: Principal Signature:  HR Office Use Only- The applicant I □ Volunteer Application	Taylor Middle School  Superintendent's S  as submitted the following:	☐ Columbia High School	
□ Park Elementary □  Signature: Principal Signature:  HR Office Use Only- The applicant P  □ Volunteer Application □ (Act 34) PA State Police Criminal	Taylor Middle School  Superintendent's S  as submitted the following:  History Report:	☐ Columbia High School	
Signature: Principal Signature:  HR Office Use Only- The applicant I  Volunteer Application  (Act 34) PA State Police Criminal  (Act 151) PA Department of Human	Taylor Middle School  Superintendent's S  has submitted the following:  History Report:  an Services Child Abuse Report:	☐ Columbia High School  Date: ignature:	
Signature: Principal Signature:  HR Office Use Only- The applicant I  Volunteer Application  (Act 34) PA State Police Criminal  (Act 151) PA Department of Human	Taylor Middle School  Superintendent's S  has submitted the following:  History Report:  an Services Child Abuse Report:  Report:  PA Residency Affia	☐ Columbia High School  Date: ignature:	
Signature: Principal Signature:  HR Office Use Only- The applicant I  Volunteer Application  (Act 34) PA State Police Criminal  (Act 151) PA Department of Huma  (Act 24) Federal Criminal History	Taylor Middle School  Superintendent's S  has submitted the following:  History Report:  an Services Child Abuse Report:  Report:  PA Residency Affid  of the last 10 years.	☐ Columbia High School  Date: ignature:	
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Signature: Principal Signature:  HR Office Use Only- The applicant I  Volunteer Application  (Act 34) PA State Police Criminal  (Act 151) PA Department of Huma  (Act 24) Federal Criminal History  PDE-6004 Arrest/Conviction Repo	Taylor Middle School  Superintendent's S  has submitted the following:  History Report: an Services Child Abuse Report: Report: \sum PA Residency Affica of the last 10 years.  ort and Certification Form	□ Columbia High School  Date: ignature:  avit if Resident of PA during the entirety	
Signature: Principal Signature:  HR Office Use Only- The applicant In Inc.  Volunteer Application  (Act 34) PA State Police Criminal  (Act 151) PA Department of Human (Act 24) Federal Criminal History  PDE-6004 Arrest/Conviction Report Volunteer Confidentiality Agreem	Taylor Middle School  Superintendent's S  has submitted the following:  History Report: an Services Child Abuse Report: Report: \sum PA Residency Affica of the last 10 years.  ort and Certification Form	□ Columbia High School  Date: ignature:  avit if Resident of PA during the entirety	



## **Volunteer Background Check Procedures**



## Pennsylvania Criminal Background Check (Act 34)

<u>https:/epatch.state.pa.us</u>

Cost: Volunteers: Free (Fee Waived)

Ч	Go to <a href="https:/epatch.state.pa.us">https:/epatch.state.pa.us</a> and click on "New Record Check (Volunteers Only)".		
	Read the Terms and Conditions and click "Accept".		
	<b>Complete Personal Information.</b> (For Volunteer Organization Name Enter "Columbia Borough School District" For Volunteer Organization Telephone Number Enter "717-684-2283")		
	Review your information and click "Proceed".		
	Enter in your Check Request Information and then click "Enter This Request"		
	Click "Finished".		
	Review Request and click "Submit"		
	After process is completed, you will receive a "No Record" or Record Pending" status. (You willreceive an email notification with your request Control #.)		
	If "No Record", then click on the control number and then click on "Certification Form".		
	<b>Print out the Certification Form to be submitted to the District.</b> (You will receive an email notification when request is completed)		
	If "Record Pending", then you will have to login later and recheck the status.		

## **RECORD STATUS**

To check the status of a record check, go to <a href="https:/epatch.state.pa.us">https:/epatch.state.pa.us</a> and click on "Check the status of a Record Check". You will need to enter in all the data exactly as it was entered for the original record checkrequest as well as your Control # to retrieve your record.



## Pennsylvania Child Abuse Background Check (Act 151)

www.compass.state.pa.us/CWIS

Cost: Volunteers: Free (Fee Waived)

Go to Child Welfare Portal <u>www.compass.state.pa.us/CWIS</u> and click on "Individual Login".		
<ul> <li>If you do not already have a login credentials, select "Create Individual Account".</li> </ul>		
<ul> <li>Follow prompts to create a Keystone ID which will allow you to login to Child WelfarePortal.</li> <li>(Once you create your Keystone ID and password, you will need to keep this information as the PA Department of Welfare does not keep this information on file.)</li> </ul>		
After clicking on "Individual Login", click on "Access my Clearances" and then "Continue" atbottom of page.		
<b>Enter in your Keystone ID and password.</b> If you already have an account, you will be asked to verifyyou account by answering your security questions or via a security sent to email. You will also be asked if you are using a private or public device for future logins.		
Click on "Create Clearance Application" and follow prompts to fill out application.		
Application Purpose – Select "Volunteer Having Contact with Children" "School Employee Governed by Public School Code"		
For Volunteer Category, choose "Other" and enter in Agency Name, "Columbia Borough School District"		
Application Information – Enter your personal & contact information.		
Current Address – Enter your current address and method of delivery for your certificate.		
Previous Addresses – Enter any and as much information as possible for everywhere you havelived since 1975.		
Household Members – Enter any and as much information as possible for everyone you havelived with since 1975		
Application Summary – You will be given a summary of your application for review.		
Complete eSignature.		
<b>Application Payment</b> - (The District does not provide payment for this service, so there is no code tobe used as a method of payment) <b>Select "Make a Payment"</b> .		
After online payment is complete you will receive a submission confirmation as well as a confirmation email of received application.		

## **APPLICATION STATUS**

**Within 14 days, you will receive a confirmation email indicating application results.** (If you selected paper certificate for method of delivery, you will receive that paper copy in the mail as well.)

Once you receive confirmation you can log onto the Child Welfare Portal <a href="www.compass.state.pa.us/CWIS">www.compass.state.pa.us/CWIS</a> and print out your results certificate to be submitted to the District.

## FBI Federal Criminal History Background Check and Fingerprinting (Act 114)

<u>https://uenroll.identogo.com/</u> Only need to complete if you have not lived in PA for the last 10 years.

**Cost:** \$23.85

Payment is made at the Fingerprinting Site. (Online payment not available.) Major Credit Cards Money orders or cashier's checks payable to MorphoTrust are accepted. No cash transactions or personal checks.

## FINGERPRINTING BACKGROUND REPORT SUBMISSION

After you have completed your fingerprinting, should submit your **UE ID #** to the District which can be found on the receipt provided after your fingerprints have been captured. You also will receive an unofficial copy of the report via mail. This report is for your records.

## **REGISTRATION**

Comple	ete pre-registration online at https://uenroll.identogo.com or telephone registration at 1-844-321-2101.
Pre-r <i>eg</i>	gistration must be completed prior to going to fingerprinting site.
SERVIC	E CODE: PDE School Districts Code - 1KG6XN PDE Volunteers - 1KG6Y3
	To get start registration enter in the appropriate service code and click "GO".
	Click on "Schedule or Manage Appointment".
	Enter your Personal & Contact Information.
	Set your Security Question & Answer.
	Enter your Citizenship Information.
	<b>Answer Personal Questions</b> . (The District does not provide payment for this service, so there is no authorization code (coupon code) to be used as a method of payment)
	Enter Additional Personal Information.
	Enter Your Mailing Address Information.
	Select the required document that you will bring with you for Identification to the fingerprinting site.
	<b>Choose your fingerprinting site based on your location.</b> (You will need to set an appointment date and time for submitting your fingerprints. Walk-ins are available, however scheduled appointments are considered a priority. You will be given the appointment availability when you select your site.)
	<b>NOTE:</b> The registration indicates that fingerprinting capture takes 3 to 5 minutes, however, please be prepared for it to take a longer as the fingerprinting process differs for each person.
	Select your date and time.
	After you submit your date and time, you will receive a Service Summary indicating the status of your Registration. We suggest you print out a copy of your status to take along with you to your appointment by clicking on "Print Status" at top right hand of page. You will also receive an email confirmation.

## **REGISTRATION STATUS/APPOINTMENT MANAGEMENT**

To check the status of your service, manage or reschedule an existing appoint, or reschedule a missed appointment, go to https://uenroll.identogo.com/ and click on "Check the Status of your Service" or "Managean existing

Appointment". You will be asked to either enter your Method of Contact information you submitted, or you may search by your UE ID# and Date of Birth.

## FINGERPRINTING LOCATIONS:

After registration, you will need to visit the fingerprint site you selected for fingerprinting. The location of the fingerprint sites and days and hours of operation for sites are posted on IDEMIA's website at https://uenroll.identogo.com. Click on "Locate an Enrollment Center" and enter your zip code

## **IdentoGO**

Community Action Partnership of Lancaster 601 S Queen St, Lancaster, PA 17603

Ephrata Public Library 550 S Reading Rd, Ephrata, PA 17522

Elizabethtown Public Library 10 S Market St, Elizabethtown, PA 17022

Lebanon Family Health Services 615 Cumberland St, Lebanon, PA 17042

York Learning Center 300 E 7th Ave, York, PA 17404-2105

Berks County Intermediate Unit 1111 Commons Blvd, Reading, PA 19605

The location of fingerprint sites may change over time; applicants are encouraged to confirm the site location nearest to their location by entering their zip code through "Locate an Enrollment Center".

Make sure you provide a State or Federal Approved ID. (List of Approved IDs found at https://uenroll.identogo.com/) Applicants will not be processed if they cannot produce an acceptable photo ID. After the identity of the applicant has been established, all ten fingers are scanned to complete the process. The entire fingerprint capture process should take no more than three to five minutes.



## Pennsylvania Residency Affidavit

Full Legal Name:	
Current Physical Ado	lress:
Phone Number:	
Date of Birth:	
Please list any forme	r names by which you have been identified:
	rm I have been a resident of the state of Pennsylvania for the 10) year period. In the chart below please list each specific location le last 10 years.
Dates of Residency	Physical Address: House #, Street, City, Zip Code
,	rm I have <b>NOT</b> been a resident of the state of Pennsylvania for the 10) year period and will obtain an FBI Fingerprint Clearance to
Name:	Date:
Signature:	



## Volunteer Confidentiality Agreement and Acknowledgement Of Policy No. 916/ Volunteers and Policy No. 806/Child Abuse Required by SD Policy 916 (Volunteers)

I understand that as a volunteer in the Columbia Borough School District, all student and staff information is confidential. I agree that I will not access, review, disclose or use confidential student or staff information without specific authorization from a school administrator. I understand that any breach of these confidentiality requirements will result in the revocation of my status as a volunteer for the Columbia Borough School District.

I understand that I must comply with all Columbia Borough School District policies and school rules applicable to school staff as well as all directions from school administrators and staff while serving as a volunteer. I have read, understand, and agree to comply with all provisions of School District Policy No. 916/Volunteers and Policy No. 806/Child Abuse in order to continue volunteering for the District. I further understand that the permission to serve as a volunteer may be revoked at the discretion of the Superintendent and school principal at any time if they determine that the revocation is in the best interests of the school or the students.

I agree to immediately report to the District, if at any time in the future, I am arrested or convicted for any offense or if I am named as a perpetrator in a founded or indicated report of child abuse.

I have read, understand, and agree to the information presented above:

Name (Print):	Phone #:
Address:	
Email:	
Signature:	Date:

## ARREST/CONVICTION REPORT AND CERTIFICATION FORM

(under Act 24 of 2011 and Act 82 of 2012)

	Section 1. Personal Information
Full L	egal Name:
which	names by you have dentified:  Date of Birth:/
	Section 2. Arrest or Conviction
	Section 2. Arrest of 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
under	ning this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I stand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a table Offense, shall subject me to criminal prosecution under 18 Pa.C.S. §4904, relating to unsworn falsification to rities.
Signa	ture 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:
    - 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 2910 (relating to luring a child into a motor vehicle or structure)
    - 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 3124.2 (relating to institutional sexual assault)
    - Section 3125( relating to aggravated indecent assault)
    - Section 3126 (relating to indecent assault)
    - Section 3127 (relating to indecent exposure)
    - Section 3129 (relating to sexual intercourse with animal)
    - 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)
- A felony offense under section 5902(b) (relating to prostitution and related offenses)
- Section 5903(c) or (d) (relating to obscene and other sexual materials and performances)
- Section 6301(a)(1) (relating to corruption of minors)
- Section 6312 (relating to sexual abuse of children)
- Section 6318 (relating to unlawful contact with minor)
- Section 6319 (relating to solicitation of minors to traffic drugs)
- Section 6320 (relating to sexual exploitation of children)
- (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.

## **For Your Documentation**

## REMINDER: KEEP ALL CLEARANCES TO REFER TO THE ISSUE DATE CLEARANCES ARE VALID FOR FIVE YEARS (60 MONTHS) FROM THE ISSUE DATE.

Current School Year	Complete <i>Volunteer Application, Volunteer Acknowledgement, PA</i> **Residency Affidavit** at the School Office  (Forms can be found on our website. You will be asked to complete forms whenturning in clearances).		
Each School Year thereafter (until renewal required).	Complete <b>Arrest and Conviction Report (PDE 6004)</b> and hand in tothe school office.  (Form can be found on our website)		
60 Months from Clearance Issue Date*	To continue to volunteer for the District, clearances must be renewed before they expire. (Currently, all clearances expire 60 Months after the issue date). Use the earliest dated clearance* as the time frame to renew both clearances (*i.e. – Child Abuse Issue Date: 4/7/21and FBI Fingerprinting Issue Date: 4/20/21, renew both clearances by 4/7/26).		
Child Abuse Expiration Date		PA Criminal Expiration  Date	FBI Fingerprinting Expiration Date

For more information including links to renew clearances, visit our Volunteer page on our website <a href="https://www.columbiabsd.org">www.columbiabsd.org</a>