



FAIRFIELD AREA SCHOOL DISTRICT

Dear Volunteer,

Thank you for expressing interest in volunteering in the Fairfield Area School District. Your time is greatly appreciated, and we will do our best to ensure that it is utilized to the fullest.

These are background check requirements for FASD. ALL COMPLETED FORMS MUST BE TURNED INTO THE SCHOOL OFFICE FOR PROCESSING. **The following items are required.**

- VOLUNTEER DISCLOSURE SHEET – Please complete the information sheet so that we have your contact information as well as your areas of interest.
- EMERGENCY INFORMATION SHEET – Please complete the emergency contact information in the event of an emergency.
- CHILD ABUSE CLEARANCE – Please see attached directions.
(select *“Volunteer” for free clearance*)
- PA CRIMINAL CLEARANCE – Please see attached directions.
(select *“Volunteer” for free clearance*)
- FBI FINGERPRINTING – Please see attached directions. Please Note: For Volunteers Only – If you have continuously resided in Pennsylvania for 10 years this is not necessary. (DHS service code **1KG6ZJ**)
- TB TEST – A negative TB test, **completed in the last 90 days**, is required to volunteer for Fairfield Area School District.

Once your application packet is complete and turned into the school office, it will be reviewed by the Superintendent. You will receive an approval letter by mail and your name will be placed on the eligible volunteer list for the district. All volunteers must obtain new clearances and a TB Test every 5 years.

The Board Volunteer Policy #916 may be viewed on our district website:

<https://go.boarddocs.com/pa/fair/Board.nsf/Public#>

Again, thank you for volunteering and we hope that you will find the opportunity rewarding,

Fairfield Area School District

03/08/2024

FAIRFIELD AREA SCHOOL DISTRICT
SCHOOL VOLUNTEERS

VOLUNTEER REGISTRATION FORM / DISCLOSURE SHEET

In accordance with Policy 916, all volunteers must have a registration form/ disclosure sheet on file in the Fairfield Area School District Central Office.

Name _____ Phone _____

Address _____ Cell Phone _____

E-Mail _____

Are you a parent of a current FASD student?

Student's Name(s) _____ Building _____

Area of Interest (check all that apply)

Classroom / Building District Athletic Coach Chaperone

Other (Where? Please describe)

Name of employee/teacher you will be working with (if applicable) _____

Building Administrator Signature _____ Date _____

Athletic Director Signature (*coaching only*) _____ Date _____

As a school volunteer you may become aware of information about a student and their family which is confidential. This can include grades, performance, skill levels and other information shared in the classroom. It is imperative that this information remain strictly confidential. Discuss student behavior and/or progress **ONLY** with the teacher.

I agree that confidentiality of student information is critical and I shall protect such information should I become aware of it.

I have received and reviewed a copy of the Fairfield Area School District Volunteer Policy. I understand the procedures and responsibilities as a volunteer and I agree to abide by them.

Volunteer Signature

Date

Superintendent Signature

Date Approved

FAIRFIELD AREA SCHOOL DISTRICT
SCHOOL VOLUNTEERS

EMERGENCY INFORMATION FOR VOLUNTEERS

Print Name _____

Birthdate _____

Emergency Contact _____ Relationship _____

Home Phone _____ Work Phone _____

Physician Preference _____ Physician's Phone _____

Special Health Problems /Allergies/Medications we should know about, i.e. bee stings, diabetes, etc.

In the event that I need emergency treatment requiring ambulance service and/or medical care, you have my permission to seek help as listed above or nearest MD/DO or ambulance/ hospital available. I will assume responsibility for fees incurred by such an emergency (via my medical insurance if applicable).

Signature

Date

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE – ACT 151

Fairfield Area School District

4840 Fairfield Road

Fairfield, PA 17320

(717) 642-8228

The Pennsylvania Child Abuse History Clearance can now be submitted and paid for online through the **Child Welfare Information Solution (CWIS) self-service portal**. The cost is \$13.00. To submit your application online, you will first need to establish a **KEYSTONE ID**.

- Access the self-service portal at www.compass.state.pa.us/cwis or you can also access the portal using a link provided under "CLEARANCES" on the Pennsylvania government website, www.KeepKidsSafe.pa.gov
- In the Child Welfare Portal window, click "CREATE A NEW ACCOUNT"
- You will be presented with a welcome page. Please read and then scroll down and click "NEXT."
- Complete all fields requested. You will also be asked to set up 3 security questions and answers that will be used if you forget your password.
- Click "FINISH"

You will then receive two e-mails; (1) confirmation of the Keystone ID that you selected, and (2) one that contains your temporary password. Upon receipt, return to the self-service portal at www.compass.state.pa.us/cwis and in the Child Welfare Portal window, click "LOGIN." You will be asked to enter your Keystone ID and temporary password. You will then be prompted to set up a new password.

Once you have your Keystone ID and password created, please refer to the following instructions to assist you with the electronic submission of your child abuse application:

- Access the self-service portal at www.compass.state.pa.us/cwis using your Keystone ID and password
- Click "CREATE CLEARANCE APPLICATION"
- Read the Getting Started information page and then click "BEGIN"
- Select appropriate APPLICATION PURPOSE - **ALL employees, prospective employees, AND volunteers must select "SCHOOL EMPLOYMENT"**
- Click "NEXT"
- Enter APPLICANT INFORMATION; click "NEXT" once complete enter all required fields; this includes providing previous names/nicknames and contact information
- Enter CURRENT ADDRESS; click "NEXT" once complete - Please note, electronic results of this clearance will be available through your PA Child Abuse History Clearance Account however, you are also given the option of receiving a paper version of your clearance certificate.
- Enter all PREVIOUS ADDRESSES since 1975; click "NEXT" once complete
- Enter HOUSEHOLD MEMBERS with whom you have lived with since 1975; click "NEXT" once complete
- You will be provided with an APPLICATION SUMMARY. Carefully review the information you entered and edit if necessary; click "NEXT" once complete.
- Complete the e-SIGNATURE; click "NEXT" once complete

You will then be presented with the "APPLICATION PAYMENT" page. Answer "NO" to the question about being provided with a payment code.

- Click "SUBMIT APPLICATION"
- You will be asked to supply your credit/debit card information; click "PAY NOW" once complete

- You will be taken to a stop-over page entitled "PAYMENT COMPLETED." **Your application has not been submitted yet. You must click on "FINALIZE AND SUBMIT APPLICATION"**
- You have successfully completed the process if you receive a "SUBMISSION CONFIRMATION" page
- Make sure you click "LOGOUT" when you are ready to leave the website

You will receive two e-mails (if you provided an e-mail address during your application submission). The first e-mail will confirm that your application was successfully received. The second e-mail is notification that your application was processed, and your results are ready to be viewed.

To review your results electronically, access the self-service portal at www.compass.state.pa.us/cwis . Log in using your Keystone ID and password. As you scroll down the page, you will see your e-Clearance ID number and below that, a green icon stating that "Your Application Has Been Processed." Click where indicated to access your paper certificate. Print out two copies; one to submit to Human Resources and the other for your records.

PENNSYLVANIA CRIMINAL HISTORY CHECK – ACT 34

Fairfield Area School District
4840 Fairfield Road
Fairfield, PA 17320
(717) 642-8228

- Access the PATCH website: <https://epatch.pa.gov> 24 hours/day, 7 days/week
- The applicant will pay a fee of \$22.00 for the background check. When using the website, you must use a credit card to pay this fee. If you do not have a credit card, you will need to submit your application via the paper form (see "Paper Submission")
- From the homepage, click on "Submit a New Record Check" under **Credit Card Users**
- Next, you will be presented with the Terms and Conditions for the Use of PATCH. Read carefully and click "Accept."
- Continue through the application process by completing the requested fields (note: under REASON FOR REQUEST, select "Employment")
- On the Record Check Results page, click on the Control # listed. This will take you to the Record Check Details page. Click on "Certification Form" on the Record Check Details page to access a printable certificate validating that a record check was conducted for the named individual (you). Please write down the Control Number and the Request Date. This information, along with a copy of the Certification Form, should be provided to the Human Resources Department in order to validate the results. Make sure you keep a copy for yourself.
- Once this background check has been requested, one of the following possible responses will be immediately received:
 - "NO RECORD" – indicates that there is no criminal history information contained in the files of the Pennsylvania State Police Central Repository. **THE CERTIFICATION FORM/SCREEN FOR "NO RECORD" SHOULD BE PRINTED AND USED AS THE ORIGINAL.** This will need to be returned to Human Resources.
 - "PENDING" – indicates that a response did not come back quick enough. If this is the response received, please check the status at a later time.
 - "REQUEST UNDER REVIEW" – indicates that the user must periodically check back to determine that final status which would be either "NO RECORD" or "RECORD"
- All "RECORD" status responses will be mailed to the address provided by the applicant and this document must be provided to Human Resources.

**ONLY FOR THOSE WHO HAVE NOT CONTINUOUSLY RESIDED IN PA
FOR THE PAST 10 YEARS**

FEDERAL CRIMINAL HISTORY REPORT – ACT 114

Fairfield Area School District
4840 Fairfield Road
Fairfield, PA 17320
(717) 642-8228

- ✓ Applicants **MUST** register via the following: www.uenroll.identogo.com - (24 hours/day, 7 days/week) or call 1-844-321-2101, 8:00 am – 6:00 pm
- ✓ **When registering, you must enter the appropriate service code for PA Department of Education – 1KG6ZJ.**
- ✓ Once registered, you may have your fingerprints taken at any of the locations listed on this site www.identogo.com/locations or at: **Lincoln Intermediate Unit #12
65 Billerbeck Street
New Oxford, PA 17350**
- ✓ The applicant is required to use a credit card to pay the fee of \$25.25 for the clearance upon being fingerprinted.
- ✓ You must provide proof of identity upon arrival at the Fingerprint Center such as a state issued driver's license, state ID card, passport, etc.
- ✓ Once your fingerprints are taken at a fingerprint location, you will be issued a receipt with your **UEID (Universal Enrollment ID)**. This is the number you must provide to the human resource department so they can access your FBI clearance on-line.

More detailed information may be found at www.identogo.com

**Department of Human Services
Service Code 1KG6ZJ**