

**Hamilton Elementary School**  
5531 Hamilton South  
Sciota, Pennsylvania 18354  
(570) 992-4960  
Fax (570) 992-9034

Dr. Karen Houck  
Principal  
khouck@sburg.org  
<http://hamilton.sburg.org>

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*To empower all students in an active pursuit of knowledge.*

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Dear Parent/Guardian:

Thank you for your interest in being a parent volunteer for the 2018-2019 school year. Your help would be very much appreciated by all here at Hamilton Elementary School. Attached you will find the paperwork needed in order to start the process of being approved to volunteer:

1. **Application** – Please fill this out and return.
2. **Volunteer Acknowledgement and Statement of Confidentiality** – Return the signed page after reading the School Volunteers Policy packet.
3. **Arrest/Conviction Report and Certification Form:** Please fill out this form and bring it to the office.
4. **PA Criminal Record Check (Act 34)** – Please use the Internet to obtain at <https://epatch.state.pa.us>. When you receive the results, bring it to the office, so a copy can be kept on file.
5. **PA Child Abuse History Clearance (Act 151)** – Please use the Internet to obtain at <https://www.compass.state.pa.us/CWIS>. When you receive the results, bring it to the office, so a copy can be kept on file.
6. **Do ONE of the following:**
  - a. If you have lived in Pennsylvania for at least 10 years — Please fill out the **Volunteer Affidavit** form and bring it to the office.
  - b. If you have lived in Pennsylvania for less than 10 years – Please go to, <https://uenroll.identogo.com> and enter Service Code: **1KG6XN** to schedule an appointment for the **FBI Criminal History** – Fingerprint check. When you receive the results, bring it to the office, so a copy can be kept on file.
7. **Mandated Report Training** – Watch an on-line training at [www.reportabusepa.pitt.edu](http://www.reportabusepa.pitt.edu). Bring printed certificate to the office to keep on file.
8. **Long-Term Volunteer** – Please fill out this form and bring it to the office.

If you have any questions, please call your school's office.

Sincerely,



Dr. Karen Houck – Principal, Hamilton Elementary

STROUDSBURG AREA SCHOOL DISTRICT  
123 Linden Street  
Stroudsburg, PA 18360

**APPLICATION FOR VOLUNTEER SERVICE**

Date: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ TEACHER: \_\_\_\_\_

PLEASE INDICATE THE TYPE OF VOLUNTEER SERVICE YOU WILL BE RENDERING:

\_\_\_\_\_  
\_\_\_\_\_

LIST ALL BUILDINGS IN THE DISTRICT IN WHICH YOU WILL BE SERVING: \_\_\_\_\_

\_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Building Principals/Supervisors:** Send your recommendation to the Assistant Superintendent for Personnel for approval by the Board of School Directors. Copies of the clearances/forms should be maintained in your building/office.

**Act 34 (criminal history)**

**Act 151 (child abuse)**

**FBI clearance (or affidavit)**

**Act 24 (PDE 6004)**

**Megan's Law Check**

**Mandated Reporter Training (not required for single event)**

**Acknowledgement/Confidentiality Agreement**

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Clearances for new volunteers must be less than one year old at the time of Board approval. Clearances must be renewed every five years.

12/2015

**Stroudsburg Area  
School District**

**VOLUNTEER ACKNOWLEDGEMENT AND STATEMENT OF  
CONFIDENTIALITY**

I hereby acknowledge that, in connection with my volunteer services, I have received a copy of the Stroudsburg Area School District Volunteer Policy. I have read and understand the policy and I hereby agree to comply with and be bound by the policy.

I also understand that in the course of volunteer service with the Stroudsburg Area School District, I have a responsibility to maintain the confidentiality of any employee or student information that I may have available to me in any form. I understand that it is my responsibility to assure rights and confidentiality of information, both written and verbal. I understand that in the performance of my duties, I am not to discuss academic or other confidential information regarding students or employees with anyone. Any breach of confidentiality will be carefully reviewed and, if substantiated, shall result in termination of volunteer involvement with the school district, and may result in legal action.

I acknowledge that I have read and understand this statement of confidentiality.

\_\_\_\_\_

Volunteer Name

\_\_\_\_\_

Date

\_\_\_\_\_

Volunteer Name (Printed)

\_\_\_\_\_

Witness (SASD Employee)

**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.

**Stroudsburg Area School District  
VOLUNTEER AFFIDAVIT**

**(Submitted in Lieu of Fingerprint-based FBI Clearance pursuant to 23 Pa.C.S.A. §6344.2(b.1))**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_ (Name) hereby attest that all information provided below is correct and current. I understand that any false statements can and will be punishable by law.

1. I hereby attest and understand that the volunteer position for which I am applying is an unpaid position.
2. I hereby attest that I have been a resident of the Commonwealth of Pennsylvania during the entirety of the previous ten-year period, i.e. from \_\_\_\_\_ {date ten years prior to current date}, to the current date of this application.
3. I hereby swear and affirm that I have not been convicted of any of the following offenses under Title 18 (relating to crimes and offenses), or any offense similar in nature to the crimes 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.
  - 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).
  - 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 (relating to corruption of minors).
  - Section 6312 (relating to sexual abuse of children).
  - The attempt, solicitation or conspiracy to commit any of the offenses set forth in this list.
  - A felony offense under the act of April 14, 1972 (P.L. 233, No. 64) known as The Controlled Substance, Drug, Device and cosmetic Act, committed within the five-year period immediately preceding verification under this section.

I hereby verify and affirm that I understand that a conviction for any of the offenses outlined above or any similar offense under federal or other state law or former law disqualifies me from approval for service as an unpaid volunteer. I further understand and agree that I have an obligation to submit written notice to the Superintendent or other designated administrator disclosing any future arrest or conviction for any such offenses, and/or any notification that I have been listed as a perpetrator in a founded or indicated report, within 72 hours, of the occurrence of such arrest, conviction, or notification of listing as a perpetrator.

I hereby verify that all statements in the within Affidavit are true and correct to the best of my knowledge, information and belief. I understand that my statements are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities, which provides that if I knowingly make false averments, can and will subject me to criminal penalties.

Volunteer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Stroudsburg Area School District  
 123 Linden Street, Stroudsburg, PA 18360  
 Phone: (570) 4221-1990 FAX: (570)424-5986  
[www.sburg.org](http://www.sburg.org)

**Long-Term Volunteer/Overnight Chaperone Application**

(Note: Athletic coaching volunteers should submit the Athletic Coach Application)

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

**Work Experience**

*Please list your two most recent employers, with your most recent employer being first.*

Place of Employment	Years of Service		Job Title & Description of Work
	From (Month & Year)	To (Month & Year)	

**Education**

*Please list any areas in which you would like to volunteer, such as book fair, field trip chaperone, etc.*

\_\_\_\_\_

**Special Skills/Areas of Expertise**

*Please list any pertinent skills you have, such as fluency in a language other than English, First Aid/CPR certification, etc.*

\_\_\_\_\_

Name and Phone Number of Emergency Contact: \_\_\_\_\_

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

Interviewed by: _____	<b>For Office Use Only</b> Date: _____
9/2015	