**ECNS Volunteer Policy**

The Commonwealth of Pennsylvania enacted legislation pertaining to Child Protective Services Laws which affects ECNS regarding our volunteer policy. Please see our volunteer policy below.

**For any questions, concerns or assistance please contact Kim Elicker, [kelicker@etowncns.org](mailto:kelicker@etowncns.org), 717-367-6772.**

ECNS Volunteer Policy

ECNS encouragesparents to visit and volunteer in their child’s classroom at any time. When parents plan to stay for an extended period, arrangements should be made with the teacher.

(a) Volunteer: An adult individual serving in an unpaid position who is responsible for the welfare of a child or children or has direct contact with children (care, supervision, guidance, or control of children, or routine interaction with children). A Volunteer is someone who is more than a Visitor, and normally involves an adult individual working directly with one or more children, having responsibility for one or more children, and having repeated interaction with one or more children.

(b) Visitor: An individual whose actions do not rise to the level of a Volunteer. Examples of Visitors include, but are not limited to, a parent, close relative, or guardian who visits a child’s classroom for a birthday celebration, special event, to be a guest reader, or otherwise observe a child’s classroom.

(c) Volunteer Clearances: Volunteers are required to submit to ECNS the following background check information which shall be updated at least every sixty (60) months as long as the Volunteer continues to volunteer at ECNS and any applicable notice of arrest:

1. A Pennsylvania State Police Criminal History Report dated no more than 60 months prior to the application date.

2. A Pennsylvania Department of Human Services Child Abuse Report dated no more than 60 months prior the application date.

3. A Federal Criminal History Report dated no more than one year prior to the application date. A Federal Criminal History Report is not required for a Volunteer who provides a written statement that he or she has been a Pennsylvania resident during the entirety of the previous 10 year period.

4. Notice of arrest. A Volunteer is required to provide written notice to ECNS of an arrest or conviction or if the Volunteer has been named as a perpetrator in a founded or indicated report within 72 hours of the arrest, conviction or listing as a perpetrator of any crime or offense listed under 23 Pa.C.S.A. §6344(c).

**Who needs clearances?**

Any parent or adult who fits the “volunteer” description of our policy will be required to have clearances on file. With recent changes to ACT 15, clearances acquired will be valid for 60 months (5 years).

**I already have my clearances, do I need to apply for them again?**

ECNS will accept clearances that have been completed within the last 60 months (5 years). Any clearances older than 60 months cannot be accepted and you will need to complete new ones.

**Is there a fee for clearances?**

There is no fee for the Pennsylvania Department of Human Services Child Abuse Report or the Pennsylvania State Police Criminal History Report, the fee for the Federal Criminal History Report has been reduced to $27.00 (see #3 below).

**What clearances do I need and where do I get them?**

All clearance forms are available at:

<http://www.dhs.pa.gov/publications/findaform/childabusehistoryclearanceforms/#.VytSMPkrKM9>

1. A Pennsylvania Department of Human Services Child Abuse Report.
   1. Electronic submission-.
      1. [www.compass.state.pa.us/CWIS](http://www.compass.state.pa.us/CWIS)
      2. Create individual account
      3. Log in after account is created, you may be directed to change your password
      4. Complete clearance
   2. Paper submission- you can see ECNS for a paper copy or visit

<http://www.dhs.pa.gov/publications/findaform/childabusehistoryclearanceforms/#.VytSMPkrKM9>

1. A Pennsylvania State Police Criminal History Report
   * 1. Electronic submission-

<http://www.dhs.pa.gov/publications/findaform/childabusehistoryclearanceforms/#.VytSMPkrKM9>

1. A Federal Bureau of Investigations Criminal History Report. **A Federal Criminal History Report is not required for a Volunteer who provides a written statement that he or she has been a Pennsylvania resident during the entirety of the previous 10 year period.**
   * 1. If you have not lived in PA for the previous 10 years you will need to complete the FBI Criminal History Report and fingerprinting. <https://www.pa.cogentid.com/index_pde>

**Volunteer Registration**

**Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s Teacher\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_**

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

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital Preference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Primary Care Provider\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorization and Agreement**

*I hereby give Elizabethtown Community Nursery School (ECNS) the right to review any and all clearances required by the Pennsylvania law and ECNS Policy. ECNS may use the information for the purpose of evaluating my fitness to volunteer with children and students and may report the information as permitted by law.*

*I understand that failure to accurately report required information (including intentional omissions) shall subject me to discipline, up to and including denial of volunteer opportunities, and may subject me to civil and criminal penalties.*

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pennsylvania Residency Statement**

I, have been a resident of Pennsylvania for the entirety of the past 10 year period.

YES NO

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

Please complete and submit the following:

\_\_\_\_\_ PA State Police Criminal History Report

\_\_\_\_\_ PA Department of Human Services Child Abuse Report

\_\_\_\_\_ Federal Criminal History Report (if necessary)

\_\_\_\_\_ Volunteer Registration form