

Last Name _____
First Name _____
Parish _____
Email _____
Phone # _____
Sport _____

Safe Environment Requirements

July, 2016

If you already have any of these clearances (possibly required by your employer, or another group), please provide us with the original for approval. You may not be required to do it again. Keep in mind that all clearances must be < 5 years old.

1. **PA State Police Criminal Record Check (PATCH)** Required by the State of PA (Dated after July 2015)
- Free, good for 5 years. (new policy, must be dated at least 2015)
- Complete online at <https://epatch.state.pa.us/Home.jsp>
- You must print the "Response for Criminal Record Check" at the end, and submit it to your LSEC or CYO Parish Rep
- OR Complete the paper form (#1), and Return the form to your group leader
2. **PA Child Abuse History Certificate** Required by the State of PA (Dated after July 2015)
- Free, good for 5 years. (new policy, must be dated at least 2015)
- Complete online at <https://www.compass.state.pa.us/cwis/public/home>
- You must print the "PA Child Abuse History Clearance" Certificate at the end, and submit it to your LSEC or CYO Parish Rep
- OR Complete the paperd form (#2), and Return the form to your group leader
3. **FBI Criminal Background Fingerprint Check** Required by the State of PA (Dated after July 2015)
- Free, because the Diocese pays for it, good for 5 years.
- Complete the attached form (#3), and return it to your LSEC or CYO Parish Rep
- The Parish Safe Environment Coordinator and Diocese of Allentown must register you in the system.
- You will then be given a registration number (by the email address supplied above), or in person through your LSEC or CYO Parish Rep.
- With this registration number, you must contact one of the sites for fingerprinting (see the list attached to form (#3).
You may also check the following website for additional/updated locations; www.pa.cogentid.com
- You will receive the results by mail in approx. two weeks, and MUST submit the original to your LSEC or CYO Parish Rep.
4. **Signed Acknowledgement Form - Diocese's Sexual Abuse Policy** (May 2014) - Required by the Diocese of Allentown
- Complete the attached form (#4), and return it to your LSEC or CYO Parish Rep
- The full policy is available online at <http://www.allentowndiocese.org/the-diocese/youth-protection/>
- OR You may ask your LSEC or CYO Parish Rep for copies to review.
5. **Signed Acknowledgement Form - Diocese's Code of Conduct** (May 2014) - Required by the Diocese of Allentown
- Complete the attached form (#5), and return it to your LSEC or CYO Parish Rep
- The full policy is available online at <http://www.allentowndiocese.org/the-diocese/youth-protection/>
- OR You may ask your LSEC or CYO Parish Rep for copies to review.
6. **Protecting God's Children Attendance Certificate** - Required by the Diocese of Allentown
- Free
- Read the attached information sheet (#6)
- Workshop locations can be found at <http://www.allentowndiocese.org/>.
- You will receive a completion certificate at the end of the training, return the original to your LSEC or CYO Parish Rep
7. **Mandated Reporter Training** - Required by the State of PA
- Free, good for 5 years.
- Read the attached information sheet (#7)
- Complete online only, at www.reportabusepa.pitt.edu
- You must print the "Certificate of Completion" at the end, and submit it to your LSEC or CYO Parish Rep
8. **PA Defensive Driving Module** - Required by the Diocese of Allentown
Required of all employees/volunteers who transport youth.
- Free
- Course is available online at <https://allentown.cmgconnect.org/> and requires you to register with a user name and password

*Thank you so much for sharing your time and talents with the youth of the
Diocese of Allentown through CYO Athletics!!
Daniel Jones, Asst. Coordinator, CYO - djones@allentowndiocese.org; 610-289-8900, ext. 30*

**PENNSYLVANIA STATE POLICE
REQUEST FOR CRIMINAL RECORD CHECK
VOLUNTEER ONLY**

1-888-QUERYPA (1-888-783-7972)

This form is to be completed in ink by the requester – (information will be mailed to the requester only). If this form is not legible or not properly completed, it will be returned unprocessed to the requester. A response may take four weeks or longer.

TRY OUR WEBSITE FOR A QUICKER RESPONSE
<https://epatch.state.pa.us>

REQUESTER NAME	
ADDRESS	
CITY/STATE/ ZIP CODE	
TELEPHONE NO. (AREA CODE)	

FOR CENTRAL REPOSITORY USE ONLY CONTROL NUMBER
AFTER COMPLETION MAIL TO: PENNSYLVANIA STATE POLICE CENTRAL REPOSITORY – RCPU 1800 ELMERTON AVENUE HARRISBURG, PA 17110-9758

SUBJECT OF RECORD CHECK				
(FIRST)	(MIDDLE)	(LAST)		
MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	SEX	RACE
VOLUNTEER'S AGENCY/ORGANIZATION (MANDATORY)		TELEPHONE NUMBER		

The Pennsylvania State Police response will be based on the comparison of the data provided by the requester against the information contained in the files of the Pennsylvania State Police Central Repository only.

By signing this form, I verify that I am submitting this request for criminal history record information in connection with my status as an unpaid volunteer. I understand that the \$8 fee is being waived because of my status as an unpaid volunteer.

REQUESTER SIGNATURE (*Signature required for processing*)	DATE
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WARNING: 18 Pa.C.S. 4904(b) UNDER PENALTY OF LAW - MISIDENTIFICATION OR FALSE STATEMENTS OF IDENTITY TO OBTAIN CRIMINAL HISTORY INFORMATION OF ANOTHER IS PUNISHABLE AS AUTHORIZED BY LAW.

PENNSYLVANIA CHILD ABUSE HISTORY CERTIFICATION

Type or print clearly in ink. If obtaining this certification for non-volunteer purposes or if, as a volunteer having direct volunteer contact with children, you have obtained a certification free of charge within the previous 57 months, enclose an \$8.00 money order or check payable to the PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES or a payment authorization code provided by your organization. **DO NOT send cash.**

Certifications for the purpose of "volunteer having direct volunteer contact with children" may be obtained free of charge once every 57 months.

Send to CHILDLINE AND ABUSE REGISTRY, PA DEPARTMENT OF HUMAN SERVICES, P.O. BOX 8170 HARRISBURG, PA 17105-8170.

APPLICATIONS THAT ARE INCOMPLETE, ILLEGIBLE OR RECEIVED WITHOUT THE CORRECT FEE WILL BE RETURNED UNPROCESSED. IF YOU HAVE QUESTIONS CALL 717-783-6211, OR (TOLL FREE) 1-877-371-5422.

PURPOSE OF CERTIFICATION (Check one box only)

- Foster parent
- Prospective adoptive parent
- Employee of child care services
- School employee governed by the Public School Code
- School employee not governed by the Public School Code
- Self-employed provider of child-care services in a family child-care home
- An individual 14 years of age or older applying for or holding a paid position as an employee with a program, activity, or service
- An individual seeking to provide child-care services under contract with a child care facility or program
- An individual 18 years or older who resides in the home of a foster parent for children for at least 30 days in a calendar year
- An individual 18 years or older who resides in the home of a certified or licensed child-care provider for at least 30 days in a calendar year
- An individual 18 years or older, excluding individuals receiving services, who resides in a family living home, community home for individuals with an intellectual disability, or host home for children for at least 30 days in a calendar year
- An individual 18 years or older who resides in the home of a prospective adoptive parent for at least 30 days in a calendar year
- Volunteer having direct volunteer contact with children
 If purpose is volunteer having direct volunteer contact with children, choose SUB PURPOSE:
 Big Brother/Big Sister and/or affiliate
 Domestic violence shelter and/or affiliate
 Rape crisis center and/or affiliate
 Other: _____
 PA Department of Human Services Employment & Training Program participant (signature required below)

SIGNATURE OF OIM/CAO REPRESENTATIVE

OIM/CAO PHONE NUMBER

AGENCY/ORGANIZATION NAME:

PAYMENT AUTHORIZATION CODE, IF APPLICABLE:

Consent/Release of Information Authorization form is attached. Applicant must fill in the "Other Address" sections. By completing the other address sections, you are agreeing that the organization will have access to the status and outcome of your certification application.

APPLICANT DEMOGRAPHIC INFORMATION (DO NOT USE INITIALS)

FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX
SOCIAL SECURITY NUMBER	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Not reported	DATE OF BIRTH (MM/DD/YYYY)	AGE

Disclosure of your Social Security number is voluntary. It is sought under 23 Pa.C.S. §§ 6336(a)(1) (relating to information in statewide database), 6344 (relating to employees having contact with children; adoptive and foster parents), 6344.1 (relating to information relating to certified or licensed child-care home residents), and 6344.2 (relating to volunteers having contact with children). The department will use your Social Security number to search the statewide database to determine whether you are listed as the perpetrator in an indicated or founded report of child abuse.

HOME ADDRESS	MAILING ADDRESS (if different from home address)	OTHER ADDRESS (if Consent/Release of Information Authorization form is attached)
ADDRESS LINE 1	ADDRESS LINE 1	ADDRESS LINE 1
ADDRESS LINE 2	ADDRESS LINE 2	ADDRESS LINE 2
CITY	CITY	CITY
COUNTY	COUNTY	COUNTY
STATE/REGION/PROVINCE	STATE/REGION/PROVINCE	STATE/REGION/PROVINCE
ZIP/POSTAL CODE	ZIP/POSTAL CODE	ZIP/POSTAL CODE
COUNTRY	COUNTRY	COUNTRY
<input type="checkbox"/> Different mailing address	ATTENTION	ATTENTION

CONTACT INFORMATION

HOME TELEPHONE NUMBER	WORK TELEPHONE NUMBER	MOBILE TELEPHONE NUMBER
EMAIL (By submitting an email contact, you are agreeing to ChildLine contacting you at this address.)		

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PENNSYLVANIA CHILD ABUSE HISTORY CERTIFICATION

PREVIOUS NAMES USED SINCE 1975 (Include maiden name, nickname and aliases.)

First	Middle	Last	Suffix
1.			
2.			
3.			
4.			
5.			

PREVIOUS ADDRESSES SINCE 1975 (Please list all addresses since 1975, partial address acceptable; attach additional pages if necessary.)

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

HOUSEHOLD MEMBERS

(Please list everyone who lived with you at any time since 1975 to present.
Please include parent, guardian or the person(s) who raised you; attach additional pages as necessary.)

Name (First, Middle, Last)	Relationship	Present Age	Gender
1.	<input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> person(s) who raised you		
2.	<input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> person(s) who raised you		
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

I affirm that the above information is accurate and complete to the best of my knowledge and belief and submitted as true and correct under penalty of law (Section 4904 of the Pennsylvania Crimes Code). If I selected volunteer, I understand that I can only use the certificate for volunteer purposes.

APPLICANT'S SIGNATURE

DATE

CHILDLINE USE ONLY

DATE RECEIVED BY CHILDLINE	SUFFICIENT PAYMENT INFORMATION RECEIVED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> VALID PAYMENT AUTHORIZATION CODE <input type="checkbox"/> WAIVED (supervisor initials) _____	CERTIFICATION ID #
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____/____/____ Date Entered in 3M Cogent

____/____/____ Date Entered in PATCH



Diocese of Allentown
Background Check & Fingerprint Authorization Form
for Lay Employees & Volunteers

Personal Information – Please Print THIS FORM MAY BE REPRODUCED

Full Name: _____
Last Name First Name Middle (Required)

Date of Birth: _____ **Birthplace:** _____
mm/dd/yyyy City, State and Country

Social Security Number: _____

Sex: _____ **Race:** _____ **Eye Color:** _____

Hair Color: _____ **Weight:** _____ lbs. **Height:** _____ ft. _____ in.

Country of Citizenship: _____ **Driver's License (State & Number):** _____

Current Address: _____
Street Address Apartment #

City State ZIP Code

Home Phone: _____ **Alternate Phone:** _____

Email Address: _____

Diocesan Location & Position: _____

Alias(es): _____
Last First Middle

Have you had a previous background check through the Diocese of Allentown? Yes _____ No _____

Acknowledgement Signature

I hereby grant to the Diocese of Allentown permission to complete a Criminal Background Check, to conduct a social security number verification, FBI fingerprinting and to complete a Motor Vehicle Check, if applicable. I consent to the Diocese following these procedures, making these inquiries and sharing this information with other Roman Catholic Dioceses, as necessary.

Signature _____
Date

Questions regarding this form should be directed to the Human Resources Office at (610) 871-5200, Extension 201.

- Completed form must be returned to the Pastor, Principal or Administrator who requested its completion.
- Parish/School must retain a copy of this completed form in the employee/volunteer file.
- Fair Credit Reporting Act (FCRA) Summary of Rights on reverse of form.

A Summary of Your Rights Under the Fair Credit Reporting Act

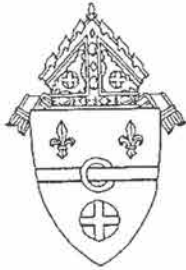
The Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: **Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.**

1. **You must be told if information in your file has been used against you.** Anyone who uses a credit report or any other type of consumer report to deny your application for credit, insurance, or employment – or to take adverse action against you - must tell you, and give you the name, address, and phone number of the agency that provided the information.
2. **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer-reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - A person has taken adverse action against you because of information in your credit file;
 - You are the victim of identity theft and place a fraud alert in your file;
 - Your file contains inaccurate information as the result of fraud;
 - You are on public assistance;
 - You are unemployed but expect to apply for employment within 60 days.
 In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
3. **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create credit scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information free from the mortgage lender.
4. **You have a right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer-reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
5. **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However a consumer reporting agency may continue to report information it has verified as accurate.
6. **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer-reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
7. **Access to your file is limited.** A consumer report agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
8. **You must give your consent for reports to be provided to employers.** A consumer-reporting agency may not give out information about you to your employer, or potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information go to www.consumerfinance.gov/learnmore.
9. **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers of credit and insurance must include a toll-free number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688)
10. **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
11. **Identity theft victims and active duty military personnel have additional rights.** For more information visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For info about your federal rights, including contact information, visit <http://www.consumer.ftc.gov/sites/default/files/articles/pdf/pdf-0096-fair-credit-reporting-act.pdf>

Para Informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Avenue. N.W., Washington, DC 20580

#4



DIOCESE OF ALLENTOWN
Sexual Abuse Policy Acknowledgment Form

I hereby acknowledge that I have received a copy of the *Policy Regarding Alleged Sexual Abuse of Minors by Diocesan Clergy, Lay Employees of the Diocese, Lay Employees of Parishes, Lay Volunteers of the Diocese and Lay Volunteers of Parishes ("Sexual Abuse Policy") Revised 20 April 2004, 19 July 2006, 10 October 2008, 29 November 2012, 23 April 2013 and 15 May 2014.*

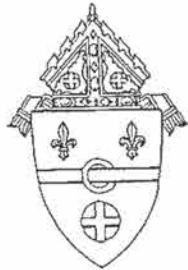
I have reviewed the Sexual Abuse Policy and understand its contents, including the statement that the Diocese of Allentown considers any allegation of sexual abuse or exploitation of a minor by a cleric or lay employee to be an extremely serious matter. I understand that I should speak with my supervisor or the appropriate Diocesan representative with regard to any questions that I may have regarding the Sexual Abuse Policy.

I further understand that the Diocese of Allentown has issued the Sexual Abuse Policy for informational or guidance purposes only and that the Diocese does not intend for the Policy to create a contract of employment or any type of binding obligation on the Diocese. The Diocese of Allentown may periodically review the Sexual Abuse Policy and it reserves the right to amend or interpret the Policy as it deems appropriate in its sole discretion. A copy of this acknowledgment form shall be placed in my personnel file.

(Date)

(Signature of Employee/Volunteer)

(Please print name)



**DIOCESE OF ALLENTOWN
Code of Conduct
Acknowledgment Form for
DIOCESAN CLERGY, LAY
EMPLOYEES AND LAY VOLUNTEERS**

I hereby acknowledge that I have received a copy of the Code of Conduct for Diocesan Clergy, Lay Employees and Lay Volunteers dated 24, October 2003 and revised 15 May 2014. I have reviewed the Code of Conduct and understand its contents. I understand that I should speak with my supervisor or the appropriate Diocesan representative with regard to any questions that I may have regarding the Code of Conduct.

I understand that in working with children and/or youth, I am also subject to a background check including criminal history. I understand that any action inconsistent with the Diocese of Allentown Code of Conduct or failure to take action mandated by the Code of Conduct may result in my removal from involvement with children and/or youth, and/or removal from ministry. My signature confirms I have read this Code of Conduct and agree to follow the standards set forth in the Code of Conduct.

I further understand that the Diocese of Allentown has issued the Code of Conduct for informational and guidance purposes only and that the Diocese does not intend for the Code to create a contract of employment or any type of binding obligation on the Diocese. The Diocese of Allentown may periodically review the Code of Conduct and it reserves the right to amend or interpret the Code as it deems appropriate in its sole discretion. A copy of this acknowledgment form shall be placed in my personnel file.

(Date)

(Signature of Employee)

Diocesan Location

(Please print name)

DIOCESE OF ALLENTOWN
Mandated Reporting Training Policy
September 25, 2015

The following people are considered mandated reporters and are required by the Commonwealth of Pennsylvania to report to law enforcement authorities all cases of suspected child abuse:

- School employees (including substitute teachers);
- All clergy, priests, deacons, ministers and spiritual leaders;
- An employee of a child-care service who has direct contact with children during the course of employment;
- Independent contractors;
- An individual supervised or managed by a person listed above and who has direct contact with children in the course of employment; and
- Volunteers with child care service, school or a program, activity or service responsible for a child's welfare or where a volunteer has direct volunteer contact with children.

If you suspect a child is in imminent danger from abuse, PLEASE CALL 911 IMMEDIATELY

The Diocese of Allentown requires that all identified mandated reporters complete an online training course through www.reportabusepa.pitt.edu, an approved training course by the Commonwealth of Pennsylvania.

The training requirement set forth above applies to all Diocesan, Parish, and School employees, regardless of whether the individuals have direct contact with children. The training requirement set forth above applies to all independent contractors of schools and any other organizations within the Diocese serving children. The training requirement set forth above applies to all volunteers of a child care service, school or a program, activity or service responsible for a child's welfare, or where a volunteer has direct contact with children, including but not limited to the following volunteer positions:

- CCD/PREP Directors, Coordinators and teachers
- CYO Coaches, assistant coaches and team chaperones
- Day Care, Pre-school and Extended care volunteers
- Coordinators of Youth Ministry and related volunteers
- Boy Scout Leaders and staff in troops chartered by a Parish
- School cafeteria volunteers
- School and teacher assistants (including parent chaperones for school activities)
- Knights of Columbus Squires Recruiters and Youth Program Leaders

Upon completion of the online course, the certificate of completion is to be printed and given to the local safe environment coordinator at the diocesan location.

If there are any individuals at your location that do not have access to a computer to complete the course, the Diocese of Allentown may be hosting training sessions that the individuals may attend. The Diocese's in-person training sessions are the Pennsylvania Family Support Alliance trainings approved by the Commonwealth of Pennsylvania. Please contact Sr. Meg Cole, SSJ, Safe Environment Coordinator for the Diocese at 610-332-0442, ext. 19 or mcole@allentowndiocese.org to determine if there is a training scheduled.

We will accept certificates from any of the Commonwealth of Pennsylvania's Approved Courses for Child Abuse Recognition and Reporting Training for Mandated Reporters as listed on the www.keepkidssafe.pa.gov website. They must be less than 5 years old to accept and renewed upon expiration.

This training will be required to be completed every five years as required by the Commonwealth of Pennsylvania