

Philly Reading Coaches

Clearance Submission Orientation

Technical Assistance for Document Submission

Necessary Clearances & Certificates

PHILLY Reading COACHES
Volunteer Paperwork Checklist

The following documents are required to begin volunteering. Click the links below. When completed, upload documents to:
bit.ly/PhillyClearances

Clearance Requirements

- ☒ PA State Criminal Background Check
- ☒ PA Child Abuse History Clearance
- ☒ FBI Waiver OR FBI Fingerprint Check (code 1KG6ZJ)
- ☒ City Release Waiver (18+)
OR Parental Release Waiver for Minors (16-17)
- ☒ National Sex Offender Registry Verification**
- ☒ Safe Schools Mandated Reporter Training**

****Only required for adults (18+)**

For a step-by-step guide, view our clearance submission orientation:
bit.ly/PhillyOrientation



PA Child Abuse History Clearance

PA State Police Criminal History Clearance

FBI Criminal History Clearance/Waiver

National Sex Offender Registry Verification

City Waiver Form

Mandated Reporter Training

PA Child Abuse History Clearance



pennsylvania
CHILD WELFARE INFORMATION SOLUTION

[FAQ](#) | [Contact Us](#)

Need Help? Contact the CWIS Support Center at 1-877-343-0494

If the child you would like to report on is in immediate danger, please call 911 immediately.

WELCOME TO THE

Child Welfare Portal

Our service provides a means for individuals to apply for PA Child Abuse History Clearance online and for mandated reporters to report child abuse in Pennsylvania.

INDIVIDUAL LOGIN

CREATE INDIVIDUAL ACCOUNT

Organizations can manage PA Child Abuse History Clearances online for their employees and volunteers

ORGANIZATION LOGIN

CREATE ORGANIZATION ACCOUNT



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PA Child Abuse History Clearance

Create Keystone ID: General Information

1  General Information

2  Profile Information

Welcome!

The Commonwealth of Pennsylvania is improving how it provides online services to citizens! Several state agencies are working together to allow you to establish a Keystone ID which creates a single way to access several different state programs. Currently, the Keystone ID that you create and manage here can be used for:

Child Welfare Portal

Users of the Child Welfare Portal can apply for a Pennsylvania child abuse history clearance or submit child abuse referrals.

SERS' Online Member Services

Members of the State Employees' Retirement System can get statements, run estimates, and more.

Disaster Training Registration

The Disaster Training Registration allows Individuals to search for and attend courses related to disaster situations.

COMPASS

COMPASS is an online application for Pennsylvanians to apply for many health and human service programs.

Child Support

Clients can apply for support services and view information about their support cases on the Child Support Website.

Consolidated Eligibility Letter (CELS)

Certified childcare providers, applicants, and household members who work in or reside at a childcare facility can submit and view combined requisite clearances.

If you already have signed into any of these programs, you do not need to create another one now. Simply use the user name and password you've already established to access all of these services. Keep in mind that if you change your password or any other profile information in any one of these programs, the changes you make will apply to all programs that use the Keystone ID. Keep an eye out for the Keystone ID sign-in on more state websites in the future. It's just another way the Commonwealth of Pennsylvania is working to serve you better.

NEXT

CANCEL

A large blue curved arrow pointing from the bottom center towards the 'NEXT' button.

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PA Child Abuse History Clearance

Username



To create a new Keystone ID, please provide the following information:

Note: Please ensure the information provided below is accurate. Once the Keystone ID is created, you will not be able to update the Keystone ID, First Name, Last Name or Date of Birth associated with this ID.

- Keystone ID (must be 6 to 64 characters)
- First Name
- Last Name
- Date Of Birth (MM/DD/YYYY)
- E-mail
- Confirm E-mail

To ensure online security, please select and provide answers for security questions. These questions will be used if you forget your password.

Security Question Tips

Choose questions for which you will easily recall the answers; do not write down the questions and answers, as this undermines their usefulness as a security tool.

Avoid using special characters (\$#%&) and punctuation (" , - .) in your answers.

You cannot use the same question more than once.

Answer cannot be any phrase directly from the question.

- Security Question 1
- Answer
- Security Question 2
- Answer
- Security Question 3
- Answer

PA Child Abuse History Clearance

Username



To create a new Keystone ID, please provide the following information:

Note: Please ensure the information provided below is accurate. Once the Keystone ID is created, you will not be able to update the Keystone ID, First Name, Last Name or Date of Birth associated with this ID.

• Keystone ID

(must be 6 to 64 characters)

• First Name

• Last Name

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Avoid using special characters (\$#@%) and punctuation (" , - .) in your answers.
You cannot use the same question more than once.
Answer cannot be any phrase directly from the question.

• Security Question 1

• Answer

• Security Question 2

• Answer

• Security Question 3

• Answer

For security reasons, please answer the following question.

Question

Which of the following is NOT a day of the week: Tuesday, Saturday, train, Sunday?

• Answer

Please review the information provided and click Finish.

BACK

FINISH

CANCEL



PA Child Abuse History Clearance



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CHILD WELFARE INFORMATION SOLUTION

[FAQ](#) | [Contact Us](#)

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[INDIVIDUAL LOGIN](#) [CREATE INDIVIDUAL ACCOUNT](#)

Organizations can manage PA Child Abuse History Clearances online for their employees and volunteers

[ORGANIZATION LOGIN](#) [CREATE ORGANIZATION ACCOUNT](#)



PA Child Abuse History Clearance



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CHILD WELFARE INFORMATION SOLUTION

[FAQ](#) | [Contact Us](#)

Need Help? Contact the CWIS Support Center at 1-877-343-0494

What Would You Like To Do Today?

Please select which account you would like to access.

[ACCESS MY CLEARANCES](#)[ACCESS MY REFERRALS](#)

PA Child Abuse History Clearance

DISCLOSURE OF PERSONAL INFORMATION

Public Disclosure

As a general rule, the Commonwealth does not disclose any personally identifiable information (PII) collected online except where you have given us permission, or where the information is public information under the Pennsylvania Right to Know Act 65 P.S. 66.1 et seq., or other applicable laws. Visitors should be aware that information collected by the Commonwealth on its websites may be subject to examination and inspection, if such information is a public record and not otherwise protected from disclosure.

Social Security Number Disclosure

You are consenting to a verification of your Social Security number through the Social Security Administration. Your Social Security number is also being sought under 23 Pa.C.S. §§ 6336(a)(1) (relating to Information in statewide central register), 6344 (relating to Information relating to prospective child care personnel), 6344.1 (relating to Information relating to family day-care home residents), and 6344.2 (relating to Information relating to other persons having contact with children). The department will use your Social Security number to search the statewide central register to determine whether you are listed as the perpetrator in an indicated or founded report of child abuse.

Providing your Social Security number may enable the Department to expedite the review of your request for a clearance certificate. If you do not provide your Social Security number additional levels of identity verification may be required by ChildLine staff, reducing the chance of automatic processing of your request.

However, please note that disclosure of your Social Security number is voluntary and therefore, if you do not consent to having your Social Security number verified or used for checking your child abuse history, we will still process your request without your Social Security number.

WARNING

You are entering a secure government website for the purpose of requesting a **Pennsylvania Child Abuse History Clearance**. By entering this site, you certify that you have read and understand the above guidelines and legislation.

Note

If your web browser prompts you to accept a security certificate, you must accept it to proceed.

WARNING!

US GOVERNMENT SYSTEM and DEPARTMENT OF HUMAN SERVICES.

Unauthorized access prohibited by Public Law 99-474 "The Computer Fraud and Abuse Act of 1986". Use of this system constitutes CONSENT TO MONITORING AT ALL TIMES and is not subject to ANY expectation of privacy.

CONTINUE ➤



PA Child Abuse History Clearance



 **pennsylvania**

Keystone Key

Username

Password

LOGIN

Self-service for Citizens

 [Forgot User ID](#)

 [Forgot Password](#)

 [Edit Profile](#)

Self-service for Commonwealth Employees

 [Change CWOPA Password or Hint Questions](#)

WARNING! US GOVERNMENT SYSTEM and PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES SYSTEM., Unauthorized access is prohibited by Public Law 99-474 The Computer Fraud and Abuse Act of 1986. Use of this system constitutes CONSENT TO MONITORING AT ALL TIMES and is not subject to ANY expectation of privacy., User acknowledges and agrees to comply with Management Directive 205.34 – Commonwealth of Pennsylvania Information Technology Acceptable Use Policy, Unauthorized use of or access to this system may subject you to civil or criminal penalties under state or federal law., This statement is being posted by the PA Department of Human Services Security and Audits Unit.

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PA Child Abuse History Clearance

The screenshot displays the Pennsylvania CWIS portal interface. At the top, the header includes the 'pennsylvania PA' logo, the user name 'CLIFF.ANDERSON720', and navigation links for 'Alerts 0', 'Account Profile', 'FAQ', 'Contact Us', and 'LOG OUT'. A secondary navigation bar contains 'PA SERVICE AGENCIES' and 'PA ONLINE SERVICES'. Below this, a pink banner reads 'Need Help? Contact the CWIS Support Center at 1-877-343-0494'. The main content area is titled 'Child Abuse History Clearances' and features two buttons: 'CREATE CLEARANCE APPLICATION' (highlighted by a blue arrow) and 'ADD APPLICATION TO ACCOUNT'. Below this, the 'Submitted Applications' section provides instructions on resubmitting applications. A green warning box states: 'Warning: Please ensure that you DO NOT save your certificate on a public computer. Doing so could leave your personal information open for others to view! Please save your certificate to a trusted computer to protect your information.' A table lists application details, including ID '000004852149', purpose 'Volunteer Having Contact with Children', and dates 'Created On 01/05/2020', 'Updated On 01/08/2020', and 'Verified On 01/08/2020'. A 'RESUBMIT' button is visible next to the application ID. A status message at the bottom indicates 'Application has been processed. To view the result, click here.' The right sidebar contains sections for 'My PA Child Abuse History', 'Status of Submitted Applications', and 'e-Clearance'.

PA Child Abuse History Clearance

Getting Started

What to Expect

The exact amount of time it will take for you to complete this clearance application will vary depending on the information you supply.

If you have been provided an authorization code by the organization that is asking you to apply for a clearance, you will have a chance to enter it on the application payment page. Otherwise you will have the ability to enter your credit/debit card information as a form of payment.

You will be required to provide an electronic signature (e-Signature) in order for your Pennsylvania Child Abuse History Clearance application (CY113) to be accepted. If you do not wish to provide an e-Signature then you must download, complete, sign and mail in a paper copy of the CY113. You can download the CY113 by [clicking here](#) 

You will be able to save and print your application once you have completed the application online.

Your clearance certificate will be available through your Child Abuse History Clearance Account once your application has been processed. Additionally, you can choose to have it sent to your home or mailing address. Your Child Abuse History Certification is valid for 60 months.

Information You Will Need

Before you start, you should have the following information readily available to help you complete your application:

Before you start, you should have the following information readily available to help you complete your application:

- Addresses where you have previously lived
- Names of all individuals with whom you have lived to include parents, guardians, siblings, spouses, etc.
- Any previous names you have used or have been known by
- Applicants that do not meet the volunteer application criteria or volunteers who have already received a volunteer certification free of charge within the previous 57 months will need to provide either credit/debit card information for an \$13.00 application fee or an authorization code from the organization that is asking you to obtain a Pennsylvania Child Abuse History Certification.

Volunteer Applicants

As a volunteer applicant you are permitted to receive one certification free of charge every 57 months. In order to submit a volunteer application without a payment, you are required to affirm that you have not already received a paper or electronic volunteer certification free of charge within the previous 57 months.

Additional Information

All of the information that you entered here is secure and confidential. For more information on the security and confidentiality of this website, please view the [Commonwealth of Pennsylvania's Privacy Policy](#)  Additionally more information is provided in the [Rights and Responsibilities](#).

If you have any questions about your application, please refer to the [Frequently Asked Questions](#) page. If you need further assistance, please contact the ChildLine and Abuse Registry's Child Abuse Clearance Unit at 1-877-371-5422.

[← PREVIOUS](#)

[BEGIN →](#)



PA Child Abuse History Clearance



pennsylvania

CHILD WELFARE INFORMATION SOLUTION

CLIFF.ANDERSON720

Alerts 0

FAQ

Contact Us

LOG OUT

Need Help? Contact the CWIS Support Center at 1-877-343-0494

Back To My Account

Part 1

Application Purpose

Applicant Information

Current Address

Previous Address

Household Members

Application Summary

Part 2

eSignature

Application Payment

e-Clearance ID: 000005758218

DELETE APPLICATION

SAVE APPLICATION

Application Purpose

Please select the reason you are submitting this Pennsylvania Child Abuse History Clearance application. You can select only one reason per application. If you require additional child abuse history clearances for any other reason, you will need to submit another application. You can submit another application at any time from your PA Child Abuse History Clearance Account.

For more detailed definitions and exceptions to clearance requirements please see the Who Needs Child Abuse Clearances at <http://keepkidssafe.pa.gov/clearances/index.htm>

☐ Volunteer Having Contact with Children: Applying for the purpose of volunteering as an adult for an unpaid position as a volunteer with a child-care service, a school or a program, activity or service, as a person responsible for the child's welfare or having direct volunteer contact with children.

☐ Foster Parent: Applying for purposes of providing foster care.

☐ Prospective Adoptive Parent: Applying for the purpose of adoption.

☐ Employee of Child Care Services: Applying for the purposes of child-care services in t

“Office of Children and Families”

☒ Volunteer Having Contact with Children: Applying for the purpose of volunteering as an adult for an unpaid position as a volunteer with a child-care service, a school or a program, activity or service, as a person responsible for the child's welfare or having direct volunteer contact with children.

"Individuals submitting an application as a Volunteer Having Contact with Children agree to use this certification for volunteer purposes only. The application fee will be waived if you have not obtained a volunteer certification free of charge within the previous 57 months.

Please Note: The use of the term "certification " is used interchangeably with "clearance"

Volunteer Category (required)

Agency Name (required)

--Select--

--Select--

Big Brother Big Sister and or an affiliate of Big Brother Big Sister

Domestic Violence Shelter and or an affiliate of Domestic Violence Shelter

☐ Other

Rape Crisis Center and or an affiliate of Rape Crisis Center

Prospective Adoptive Parent: Applying for the purpose of adoption.

Then click “Next”

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PA Child Abuse History Clearance

[Back To My Account](#)

e-Clearance ID: 000005758218

DELETE APPLICATIONSAVE APPLICATION

Part 1

Application Purpose

Applicant Information

Current Address

Previous Address

Household Members

Application Summary

Part 2

eSignature

Application Payment

Applicant Information

Please provide some basic information about yourself and confirm that the email address listed below is the email address where you wish to receive all emails regarding this application.

First Name (required)

Middle Name

Last Name (required)

Suffix

Eg., John

Eg., Scott

Eg., Smith

--Select--

Date of Birth (required)

Gender (required)

Male

You are consenting to a verification of your Social Security number through the Social Security Administration. Your Social Security number is also being sought under 23 Pa.C.S. §§ 6336(a)(1) (relating to information in statewide central register), 6344 (relating to information relating to prospective child care personnel), 6344.1 (relating to information relating to family day care home residents), and 6344.2 (relating to information relating to other persons having contact

Follow the rest of the application process.

When you submit it, you will receive a confirmation email within a few days

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PA State Police Criminal History Clearance

epatch.pa.gov/home

[PATCH](#) [Home](#) [Record Check](#) [FAQ](#) [Help](#)



Welcome to Pennsylvania Access To Criminal History

The PATCH unit will no longer mail out any PATCH check that is requested on the EPATCH web site. It will be the responsibility of the requestor to print out the No Record or Record response.

PATCH Helpline 1-888-QUERY-PA (1-888-783-7955)

All requests for Notarized copies of a Criminal Record Check MUST BE submitted by mail.

New Volunteer Record Check

Submit a New Record Check

Check the status of a Record Check

Registered PATCH Accounts

(Only used by pre-approved organizations)

Why does PATCH exist?

Its purpose is to better enable the public to obtain criminal history record checks. The repository was created and is maintained in accordance with Pennsylvania's Criminal History



PA State Police Criminal History Clearance

Home

TERMS AND SERVICES

Terms and Conditions for the use of PATCH

Please read the following terms and conditions for the use of the PATCH application and click the accept button to proceed.

The PATCH web site is available for registered and non-registered users wishing to acquire criminal history information on individuals. Users must agree to abide by all sections of the Criminal History Record Information Act and all terms stated forthwith.

Volunteer

1. **No Record:** If this status is assigned to the request it is the user responsibility to double click on the control number. This will take the user to the details screen where the user will double click on the blue hyper link, "Certification Form", near the center of the page. By clicking on "Certification Form", a certified no record form will be displayed in PDF format.
2. **Request Under Review:** If this status is assigned to the request, the user must periodically check the PATCH web site to determine the final status of the request. A status of "Request Under Review", will result in one of the following final status:
 - **No Record: Follow the instructions above for a no record response.**
 - **Record: Indicates the person has a record and it is the user's responsibility to double click on the control number. This will take the user to the details screen where the user will double click on the blue hyper link, "Certification Form", near the center of the page. By clicking on "Certification Form", a certified record form and the corresponding RAP Sheet will be displayed in PDF format. This form should be printed.**
3. **Pending:** This status is occasionally assigned when traffic is extremely heavy and requires the user to check back at a later time. A request should not remain in pending status for more than 24 hours. If a request remains in pending status for more than 24 hours call the PATCH Help Line toll-free at 1-888-QUERY-PA (1-888-783-7972).

Volunteer Acknowledgement Section

☐ By checking this box 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 \$22 fee is being waived because of my status as an unpaid volunteer. I also understand that any false statements made on this form are subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities and can be punishable by fine or imprisonment.

Accept

Decline

PA State Police Criminal History Clearance

Personal Information

Please fill in the following form prior to making your record check request. Fields marked with an * are required.

When an email address is entered an email confirming that the request was received by the Pennsylvania State Police will be sent. Another email will be sent when the request is completed.

Once this step is completed, information regarding the individual for which you are performing a background check will be gathered. Each background check performed will cost **\$ 0.00** dollars.

Reason For Request:

VolunteerFREE

* Volunteer Organization Name:

Volunteer Organization Phone Number:

* First Name:

Middle Name:

* Last Name:

“Office of Children and Families”
Phone number: (833) 750-5627

Then click “Next”

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PA State Police Criminal History Clearance

Please verify the following information prior to clicking the "Proceed" button. If you need to make changes, click the "Back" button.

Once this step is completed, information regarding the individual for which you are performing a background check will be gathered. Each background check performed will cost \$ 0.00 dollars.

Reason For Request: VolunteerFREE

Volunteer Organization Name: Church of Jesus Christ of Latter Day Saints

Volunteer Organization Telephone Number:

Requestor Name: John Smith

Address: 123 Road RD
Pittsburgh, PA
15236

Country: US

Email Addr: my_email@mail.com

Phone Number: (123) 456-7891

[< Back](#) [Cancel](#) [Proceed](#)

[Home](#) | [Record Check](#) | [Help](#) | [Privacy Policy](#) | [Pitt State Police Home Page](#)



After you click “Proceed”, they will send you a confirmation email, and an email with your results

FBI Clearance Waiver

If you have lived in Pennsylvania for 10 years or more, you may fill out the FBI Waiver in place of the background check

FBI Clearance Waiver for volunteers residing in Pennsylvania for 10 or more years

I, _____, swear/affirm that I have been a resident of Pennsylvania for the past 10 years or have received a Federal Criminal Background check since establishing residence and provided that check to the City of Philadelphia. I also swear/affirm that I am not disqualified from Service based upon a conviction of an offense under section 6344 (see below) or an equivalent crime under federal law or the law of another state, The District of Columbia, or Puerto Rico:

- Chapter 25 (relating to criminal homicide)
- Section 2702 (relating to aggravated assault)
- Section 2709 (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)
- Section 5902(b) (relating to prostitution and related offenses)
- Section 5903(c) (d) (relating to obscene and other sexual material and performances)
- Section 6301 (relating to corruption of minors)
- Section 6312 (relation to sexual abuse of children),

I have not been convicted of a felony offense under Act 64-1972 (relating to the controlled substance, drug device and cosmetic act) committed within the past five years.

I understand that I shall not be approved for service if I have been convicted of any of the crimes listed above or of offenses similar in nature to those crimes 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.

I understand that if I am arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or am named as perpetrator in a founded or indicated report, I must provide the administrator or designee with written notice not later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the Statewide database.

I understand that if the person responsible for employment decisions or the administrator of a program, activity or service has a reasonable belief that I was arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or was named as perpetrator in a founded or indicated report, or I have provided notice as required under this section, the person responsible for employment decisions or administrator of a program, activity or service shall immediately require me to submit current clearances obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate.

I understand that if I willfully fail to disclose information required above, I commit a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position. I understand that the person responsible for employment decisions or the administrator of a program, activity or service is required to maintain a copy of my clearances.

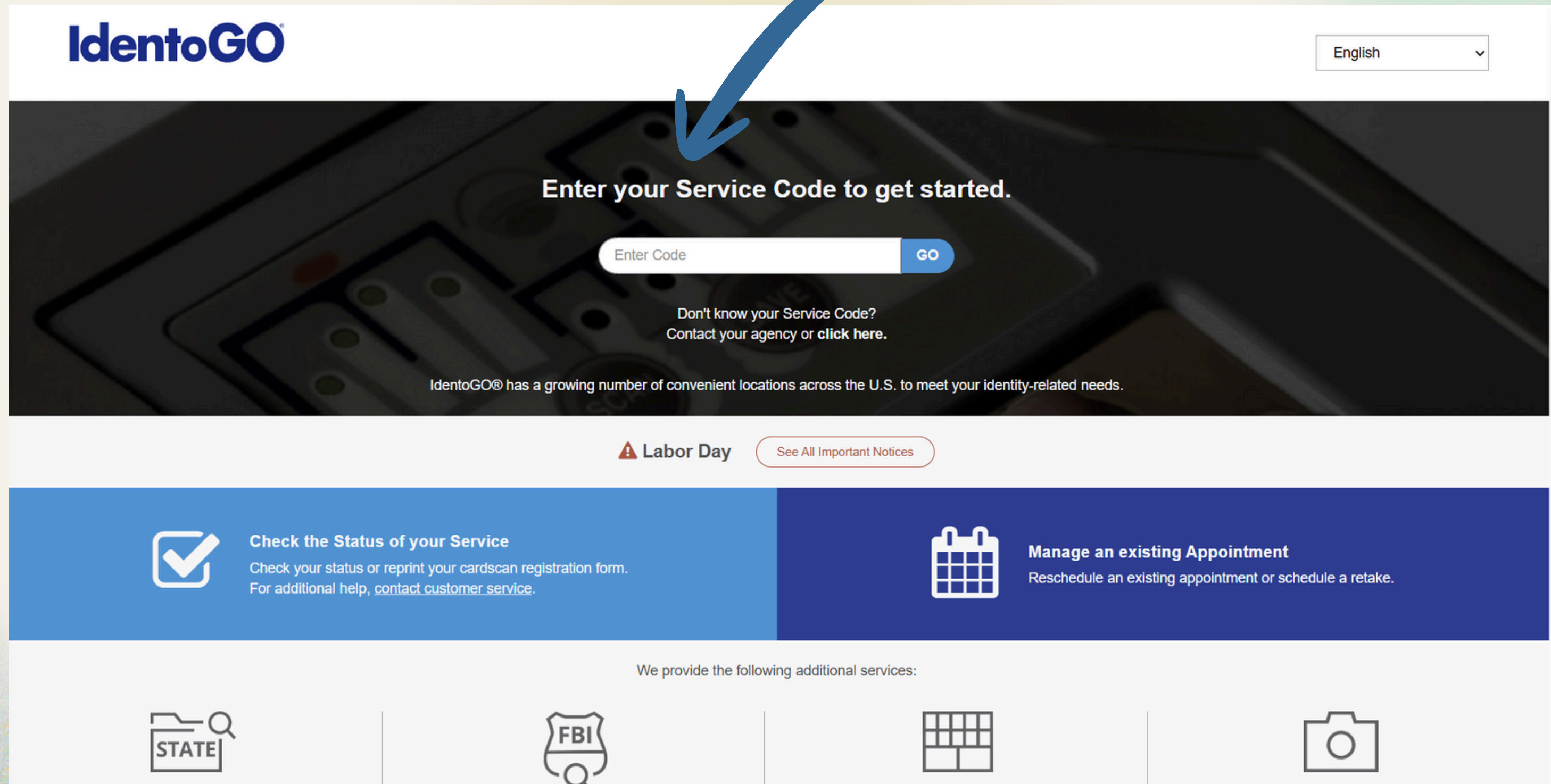
I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name	
Signature	
Date	



FBI Background check OR Signed Volunteer Affirmation

Code: 1KG6ZJ



The screenshot shows the IdentoGO website interface. At the top left is the IdentoGO logo. At the top right is a language dropdown menu set to "English". The main header area has a dark background with the text "Enter your Service Code to get started." and a text input field labeled "Enter Code" with a blue "GO" button. Below the input field, it says "Don't know your Service Code? Contact your agency or [click here.](#)". Further down, a line of text states "IdentoGO® has a growing number of convenient locations across the U.S. to meet your identity-related needs." Below this is a "Labor Day" notice with a red triangle icon and a button that says "See All Important Notices". The main content area is divided into two blue boxes. The left box has a checkmark icon and the text "Check the Status of your Service" followed by "Check your status or reprint your cardscan registration form. For additional help, [contact customer service.](#)". The right box has a calendar icon and the text "Manage an existing Appointment" followed by "Reschedule an existing appointment or schedule a retake." Below these boxes, it says "We provide the following additional services:" followed by four icons: a folder with a magnifying glass labeled "STATE", an FBI shield with a magnifying glass, a calendar, and a camera.

IdentoGO

English

Enter your Service Code to get started.

Enter Code GO

Don't know your Service Code?
Contact your agency or [click here.](#)

IdentoGO® has a growing number of convenient locations across the U.S. to meet your identity-related needs.

Labor Day [See All Important Notices](#)

 **Check the Status of your Service**
Check your status or reprint your cardscan registration form.
For additional help, [contact customer service.](#)

 **Manage an existing Appointment**
Reschedule an existing appointment or schedule a retake.

We provide the following additional services:

 **STATE**







FBI Background check

IdentoGO[®]

English ▾

1KG6ZJ - Pennsylvania DHS-Volunteer

[← Back to Home](#)



Schedule or Manage Appointment
Schedule an in-person appointment or change an existing appointment.

What do I need to bring to enrollment?
Find out which documents you need to bring to the enrollment center to facilitate processing.

Locate an Enrollment Center
Locate and get directions to an enrollment center near you.

Submit A Fingerprint Card by Mail
Complete the pre-enrollment information necessary to submit a fingerprint card enrollment by mail.

**Check the Status of your Service**
Check your status or reprint your cardscan registration form.
For additional help, [contact customer service](#).

**Manage an existing Appointment**
Reschedule an existing appointment or schedule a retake.

FBI Background check

Fill out your personal information

1KG6ZJ - Pennsylvania DHS-Volunteer

Essential Info

Additional Info

Citizenship

Personal Questions

Personal Information

* Required Fields

Please enter your information below (letters, spaces, hyphens (-), and apostrophes (') are allowed in name fields). Then click 'Next' to check the status of your service or 'Cancel' to exit.

☒ Name / Method of Contact

☐ UE ID / Date of Birth

Notes:

- Important! You must finish the registration process to be fingerprinted. You will receive an email or confirmation number when registration is complete.
- Legal Name must match exactly on all identification documents brought to enrollment.
- Remember the phone numbers and/or email address provided below, as they will be used to retrieve your information during your in-person enrollment.

Email Address Entry

While not required, it is highly recommended to input your email address during the registration process. You will be emailed a link to access your Eligibility Letter allowing quicker access to your results. If a "Criminal History Record" is found as a result of your Federal Criminal Background Check, your results will be mailed to you only. Eligibility Letters will be mailed to all applicants regardless of providing an email address.

Legal Name

* First Name

* Middle Name (or NMN if no middle name)

* Last Name

Suffix

-- Choose One --

Date of Birth

* Date of Birth

* Confirm Date of Birth

Click "Next"

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FBI Background check

1KG6ZJ - Pennsylvania DHS-Volunteer

Essential Info → **Additional Info** → Citizenship → Personal Questions → Personal Info → At

* Required Fields

Please enter your information below. Then click 'Next' to continue or 'Cancel' to exit.

Agency Identifiers

*** Create a Security Question for your Background Check Results**

Type your question in box. You will be prompted with this question when attempting to access your Eligibility Letter.

Answer to your Security Question in the box below

IMPORTANT! Store your answer in a safe place—it is your answer only and is not able to be retrieved or reset. If you are not a Pennsylvania resident, your answer will be used to verify your identity. If you are a Pennsylvania resident, your answer will be used to verify your identity. If you are not a Pennsylvania resident, your answer will be used to verify your identity. If you are a Pennsylvania resident, your answer will be used to verify your identity.

You will have unlimited access to the link for a period of thirty days. Prior to the expiration of the 30-day period, you must download and save the Eligibility letter to retain an electronic copy. The email link cannot be reset or re-emailed.

After clicking the emailed link, you will have three attempts to correctly answer your Security Question to retrieve your Eligibility Letter.

Your Eligibility Letter will be mailed to the address you provided on the 'Essential Info' screen. If unsure of your address, please click the back button and verify the information you entered is correct before continuing on the re-enrollment process.

**You must select a security question
- you will need the answer to access
your results**

FBI Background check

Personal Info > Additional Info > Citizenship > **Personal Questions** > Personal Info > Address > Documents

* Required Fields

Please answer the questions below. Then click 'Next' to continue or 'Cancel' to exit.

* Have you ever used an alias? ☐ Yes ☐ No

* Is your mailing address the same as your residential address? ☐ Yes ☐ No

* Do you have an Authorization Code (Coupon Code) that you will be using as a method of payment?
NOTE: Please have Authorization Code available to enter on the website later in the scheduling process.

☐ Yes ☒ No

Complete “Citizenship”, “Personal Questions”, “Personal Info”, and “Address”

FBI Background check

The screenshot shows the 'Documents' step of an FBI background check enrollment process. At the top, a progress bar indicates the sequence: Personal Questions, Personal Info, Address, Documents (current step), Location, and Date and Time. Below the progress bar, a message states: 'Please select the required documents to bring to your enrollment. Then click 'Next' to continue or 'Cancel' to exit.' The 'Documents' section features a dropdown menu labeled '* Document' with the placeholder text '-- Choose One --'. Below this, a question asks: '* Does the name you are enrolling under match the name on all documents selected?' with radio button options for 'Yes' and 'No'. At the bottom left is a red 'Cancel' button, and at the bottom right are 'Back' and 'Next' buttons. A blue arrow points from the text 'Driver's License, Passport, etc...' to the document selection dropdown. Another blue arrow points from the text '(You will need to bring this same identification document to the appointment)' to the same dropdown. The footer contains the text: '2017 © IdentoGO®. All rights reserved' and a link to 'Privacy Policy'.

Personal Questions Personal Info Address Documents Location Date and Time

* Required Fields

Please select the required documents to bring to your enrollment. Then click 'Next' to continue or 'Cancel' to exit.

Documents

* Document

-- Choose One --

* Does the name you are enrolling under match the name on all documents selected?

☐ Yes ☐ No

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Driver's License, Passport, etc...

(You will need to bring this same identification document to the appointment)

FBI Background check

Enter your location to choose an appointment



1KG6ZJ - Pennsylvania DHS-Volunteer

Personal Info

Address

Documents

Location

Date and Time

* Required Fields

Enter a Postal Code, City, Airport Code or Special Location Access Code to search for a location to schedule your appointment. After selecting a location, click 'Next' to continue or 'Cancel' to exit.

Note: Your registration is not yet complete. You must select a location, as well as a date/time on the following pages prior to receiving your appointment confirmation.

Search for an Enrollment Center by Postal Code, City and State, or Airport Code.

Number of Results: 5

Use My Location

Search

All Locations will be closed Labor Day, Mon, 01 Sep 2025, unless otherwise indicated

Cancel

Back

Next

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Privacy Policy

26

FBI Background check

Search for an Enrollment Center by Postal Code, City and State, or Airport Code.

19102

Use My Location

Search

Number of Results: 5

All Locations will be closed Labor Day, Mon, 01 Sep 2025, unless otherwise indicated

Location	Address	Next 7 Days	Distance
▼ Philadelphia, PA IdentoGO 233 S 6th St Ste C2 Philadelphia, PA 19106-3763 Hours: Monday - Friday: 09:00 AM - 04:30 PM This Enrollment Center is located inside ArcPoint Labs	233 S 6th St	27 appointments available	0.79 mi
➤ Philadelphia, PA	744 South St	170 appointments available	0.88 mi
➤ Philadelphia, PA	4022 Market St	15 appointments available	2.09 mi
➤ Philadelphia, PA	2313 E Venango St	147 appointments available	4.57 mi
➤ Philadelphia, PA	5707 Germantown Ave	149 appointments available	5.81 mi

✕ Cancel

◀ Back

Next ▶

Select a location

FBI Background check

Price: \$22.95
CASH NOT ACCEPTED!

Select a preferred date and time for your appointment at the specified location. Then click 'Submit' to confirm or 'Cancel' to exit. If you are unable to make an appointment for the available times or all appointments are booked, click the 'Back' button below, to select another location.

Appointment Date and Time (first available displayed by default)

Select Date

Tuesday, Sep 2nd

Select Time

11:40 AM

☐ Walk In

Note:
Scheduled Appointments take priority over walk-ins. Appointments are highly recommended due to the possible long wait times associated with walk-in processing.

Location Details:

📍 IdentoGO
233 S 6th St
Ste C2
Philadelphia, PA 19106-3763

This Enrollment Center is located inside ArcPoint Labs

✕ Cancel

⏪ Back

Submit ⏩

Select Date & Time

You will receive a confirmation email -

National Sex Offender Verification (NSOR)

Official website of the Commonwealth of Pennsylvania

PA

Commonwealth of Pennsylvania

Translate

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Services

Agency Directory

Your Government

Visit PA

News

Services

Request a National Sex Offender Registry Verification for Child Abuse Clearances

Request a National Sex Offender Registry Verification

In order to own, work for, or volunteer at a regulated child care provider or any relative provider caring for children receiving subsidized child care, you will need to request and maintain a National Sex Offender Registry Verification letter.

Request verification (PDF)

Clearances Homepage

On this page

Overview

Who Requires a Verification Letter?

How Long Does a Letter Last

Overview

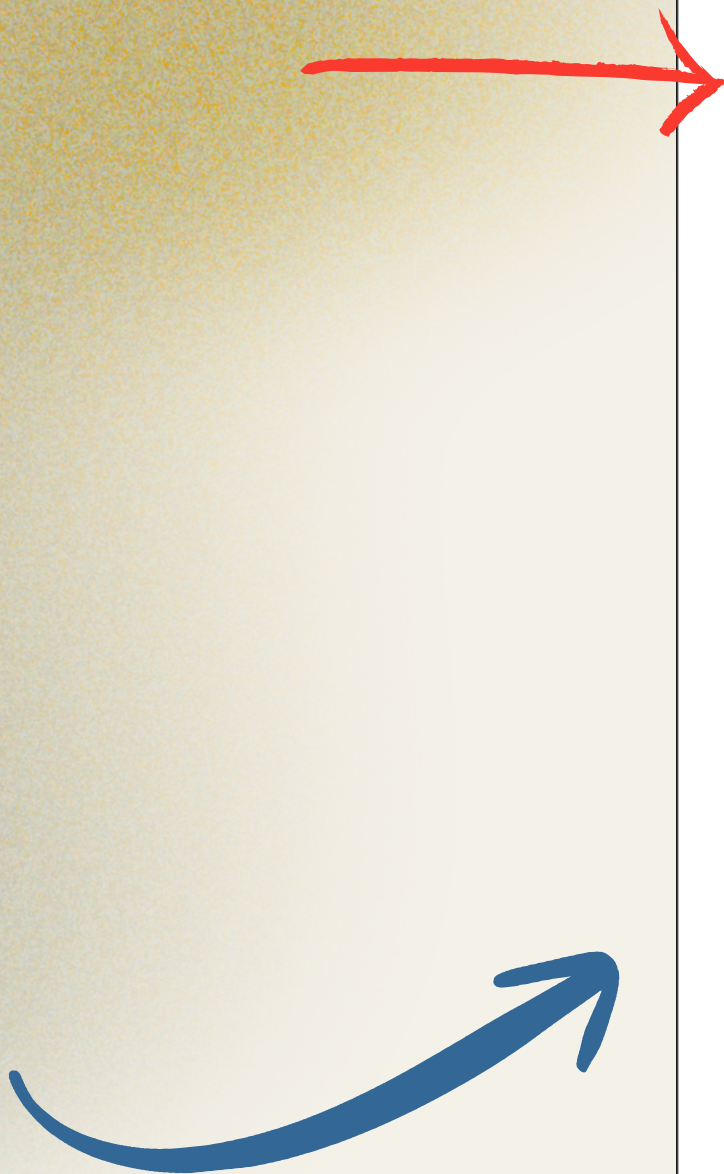
To maintain compliance with the federal Child Care Development Block Grant, the Office of Child Development and Early Learning (OCDEL) partnered with the Office of Children, Youth, and Families (OCYF) to

Additional Resources

Clearances

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National Sex Offender Verification (NSOR)



APPLICATION: National Sex Offender Registry Verification	
The following individuals must complete the National Sex Offender Registry verification application: - Any individual 18 years or older residing in the child-care setting where child care is occurring. - Any individual working for a Regulated Child-Care Provider. - Any individual with an ownership interest (corporate or non-corporate) in a Regulated Child-Care Provider and who participates in the organization and management of the operation. - Any volunteer of a child-care provider, group day-care home or family child-care home.	
Type or print clearly in ink. Fill in all necessary fields on the application. Once completed, use one of the following three options to submit the application for processing: - Mail to the Clearance Verification Unit, ChildLine at the following address: Department of Human Services, PO Box 8170, Harrisburg, PA 17105-8170; OR - Scan the completed application and email to: RA-PWNSOR@pa.gov In the subject line list 'NSOR Verification Applicant Last Name (i.e., Smith)'; OR - Hand deliver to the Clearance Verification Unit drop-off box located at: 2525 North 7th Street, Harrisburg, PA 17110. Free parking is available in the visitor's lot.	
- There is no fee for the National Sex Offender Registry verification letter. - Processing time is fourteen days from the date the application is received. - An electronic copy of the verification letter will be provided via encrypted email. - Retain a copy of the completed application for your record. You may need a copy as proof of your submission for your employer. - Refer all questions to the Clearance Verification Unit at 877-371-5422.	
Purpose of the National Sex Offender Registry Verification (Check one box only)	
☐ Individual 18 years or older residing in the facility where child care is occurring.	
☐ Individual working for a Regulated Child-Care Provider.	
☐ Individual with an ownership interest (corporate or non-corporate) in a Regulated Child-Care Provider and who participates in the organization and management of the operation.	
☐ Volunteer of a child-care provider, group day-care home or family child-care home.	
Applicant Demographic Information (All fields required)	
Full Name (Last, First, Middle Initial):	
Social Security Number (XXX-XX-XXXX):	
Date of Birth (MM/DD/YYYY):	
Daytime Phone Number (XXX-XXX-XXXX):	
Home Mailing Address:	
	Include full street address, (Apt # or PO Box if applicable),
	City, State and Zip Code
E-mail Address:	
I affirm 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 per Section 4904 of the Pennsylvania Crimes Code.	
Signature:	Date:

You may either:

- Fill out on your computer, print, scan and email OR
- Print and fill out by hand, scan, and email OR
- Print, fill out, and mail

City Waiver

**CITY OF PHILADELPHIA
GENERAL RELEASE
VOLUNTEERS**

I, _____, desire to volunteer my services to the City of Philadelphia ("City") and in consideration of the opportunity to serve the City as a volunteer and gain valuable experience and enrichment while doing so, agree as follows:

1. Release. I, for myself and my heirs, successors, and assigns, and all persons claiming through any of them ("Releasing Parties") do hereby release the City, its officials, departments, agencies, agents, representatives, boards, commissions, employees, successors and assigns ("Released Parties"), from any action, causes of action, suits, claims, liabilities, losses, costs and expenses (including reasonable attorneys fees and court costs), at law or in equity, which any of the Releasing Parties may have against the Released Parties for any loss, damage or injury to property or person, including death, relating to or arising from my participation in the provision of volunteer services to the City; provided however, that this release shall not apply to any action, causes of action, suits, claims, liabilities, losses, costs and expenses (including reasonable attorneys fees and court costs), at law or in equity, which arise solely from the gross negligence or willful misconduct of the Released Parties.
2. Assumption of Risk. I voluntarily assume all risks of loss, damage and all injuries (including personal injury, disability and death) that may be sustained while providing volunteer services to the City.
3. Visual Image/Photo Authorization. I authorize, without compensation, the use by the City of my image and/or voice recordings relating to my volunteer services to the City. This authorization includes permission to reproduce, publicize, broadcast or display my visual images or voice recordings, with or without my name, and without any form of compensation for the use of my images, name or voice recordings, throughout the world, an unlimited number of times in perpetuity in any and all media, now known or hereafter invented.
4. Use of City Vehicles Prohibited. I agree that I will not operate any City vehicle while providing volunteer services to the City.

BY SIGNING MY NAME BELOW, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS RELEASE FROM LIABILITY.

IN WITNESS WHEREOF, and intending to be legally bound, I have executed this Release as of the date stated below:

DATE: _____

VOLUNTEER:

WITNESS:

Print Name: _____, Volunteer

Print Name: _____, Witness



Mandated Reporter Training



SELF-REGISTRATION INSTRUCTIONS – SCHOOL DISTRICT OF PHILADELPHIA

The School District of Philadelphia has elected to use the SafeSchools online safety training program to train both professional and support staff on school-related safety issues. SafeSchools offers trainings in all facets of school safety issues, and its compliance management system tracks all the training for the district, allowing us to easily demonstrate state and federal compliance with safety mandates. SafeSchools courses have been authored by nationally renowned experts and has been endorsed by a number of school boards and superintendent associations nationwide.

As an employee who requires safety training, you will need to register with SafeSchools to receive your active assignments.

First, go to the SafeSchools homepage, <https://philasdnondistrict-pa.safeschools.com/login> and click "Register" below the "Login" button. On the next screen you will be prompted to enter the registration key according to your position. Next you will be prompted to enter some basic information, including a username of your choice, which you will use to login to the system moving forward.



Position	Registration Key
Contractor	ebee1b6e

Once you log into the site, you will see a list of courses assigned to you, and the date on which they are due. To begin a course, click on the title then follow the prompts. To earn a certificate of completion, you must complete all sections of a course and pass the quiz.

If you have any questions, please contact Employee Records at 215-400-4600, option 7 (act126@philasd.org).

Mandated Reporter Training



Vector Solutions™
Vector Training, K-12 Edition

LOG IN



Provided by
The School District of Philadelphia

The safety of our staff and students is of utmost importance. That's why we're pleased to offer the Vector Training, K-12 Edition to our employees. We're confident you'll find these courses to be informative and helpful towards maintaining a safe learning environment.

Username

Contractor

Log In →

[Forgot Login?](#)

Register

Sign Up



What's New?



Mandated Reporter Training



Vector Solutions™
Vector Training, K-12 Edition

Sign Up

If you have already registered for an account:

Please do not create a second account. Your training progress from your first account would not be carried over. Instead, please go [here](#) and recover your login credentials using your email address.

Username

*required

First Name

*required

Last Name

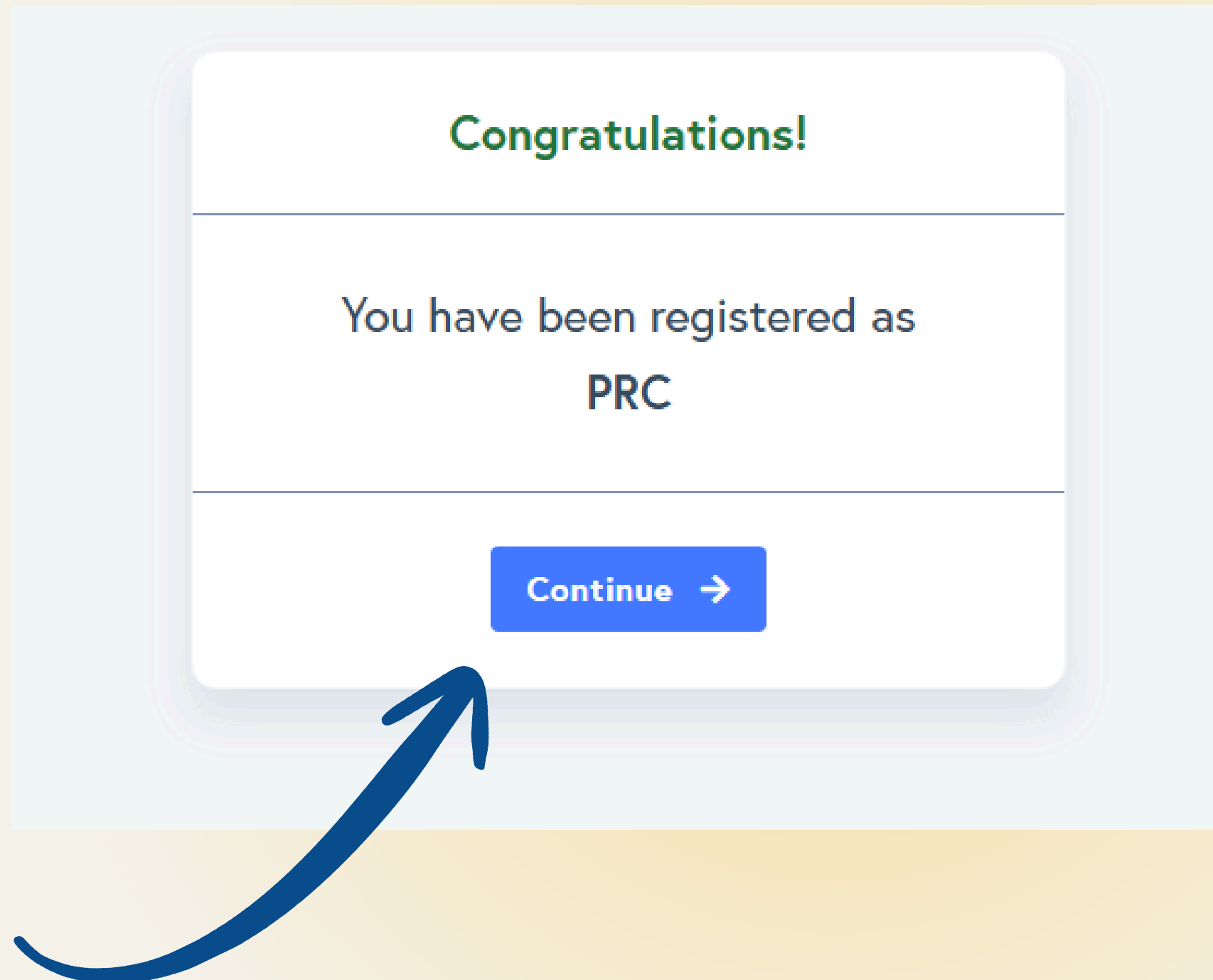
*required

Required input is missing and/or invalid

Register ✓

Create your own username

Mandated Reporter Training



Mandated Reporter Training

PA Act 126 - Part 1 :

Child Abuse and Mandatory Reporting

i

Select the Accept button to continue the course.

Disclaimers

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For information, address:

Vector Solutions, 2135 Dana Avenue
Suite 300
Cincinnati, OH 45207.

Decline ✕

Accept ✓



Mandated Reporter Training

Complete all Training Sections

You will be quizzed at the end of part 1. Must receive 80% score or higher .

When you finish part 1, you will be prompted to complete part 2.

PA Act 126 - Part 1: Child Abuse and Mandatory Reporting

(1 of 2)

This course is Part 1 of Pennsylvania's ACT 126 mandatory training for school employees. The training focuses on the following topics: essential elements of the Pennsylvania Child Protective Services Law, facts about child abuse...

[Read More >](#)

Course Sections

0 / 7 Complete

- Act 126 training**
The School District of Philadelphia Required >
- Introduction**
About 7 Minutes Required >
- Facts About Child Abuse**
About 4 Minutes Required >
- Recognizing Categories of Child Abuse**
About 27 Minutes Required >
- Mandatory Reporting**
About 17 Minutes Required >
- Review**
About 6 Minutes Required >
- Final Assessment**
About 2 Minutes 80% required to pass Required >

Course Requirements

Assessment Requirement
80%

Course Details

- Typical Base Course Duration
60 Minutes
- Category
Social and Behavioral

Resources

All resources will open in a new window.

- [Child Welfare Portal](#)
- [Pennsylvania Department of Education: Act 126](#)
- [Pennsylvania Child Abuse Reporting Form CY-47](#)