



**OFFICE FOR CHILD AND  
YOUTH PROTECTION**

**ARCHDIOCESE OF  
PHILADELPHIA**

**HOW TO OBTAIN CLEARANCES FOR PARISH/SCHOOL  
VOLUNTEERS AND COACHES:**

**All this information can be obtained at the following website:**

**[childyouthprotection.org](http://childyouthprotection.org)**

**CLEARANCES:**

- ❖ **PA State Police Criminal Record Check (expires every 3 years)**
- ❖ **PA Department of Public Welfare Child Abuse Clearance Check (expires every 3 years)**
- ❖ **Federal History Fingerprint Clearance ~ ONLY if you lived outside of PA within the last 10 years (expires every 3 years until you have lived in PA for 10 consecutive years)**

Go to **[childyouthprotection.org](http://childyouthprotection.org)**

select Staff & Volunteers, then select Checks & Clearances

- ❖ **Disclosure Statement Application for Volunteers**

Go to **[childyouthprotection.org](http://childyouthprotection.org)**

select Staff & Volunteers, then select Information for Volunteers

**TRAINING:**

- ❖ **Safe Environment Training**
- ❖ **Technology Addendum**
- ❖ **Mandated Reporter Training**
- ❖ **Signed Mandated Reporter Acknowledgement Form**

Go to **[childyouthprotection.org](http://childyouthprotection.org)**

select Staff & Volunteers, then select Required Training

**DISCLOSURE STATEMENT APPLICATION FOR VOLUNTEERS**  
**Required by the Child Protective Service Law**  
**23 Pa. C.S. Section 6344.2 (relating to volunteers having contact with children)**

I swear/affirm that I am seeking a volunteer position and **AM NOT** required to obtain a clearance through the Federal Bureau of Investigation, as:

- the position I am applying for is unpaid; **and**
- I have been a resident of Pennsylvania during the entirety of the previous ten-year period.

I swear/affirm 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.

I swear/affirm that I have not been convicted of any of the following crimes under Title 18 of the Pennsylvania consolidated statues 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.

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	(relating to sexual abuse of children), or an equivalent crime under Federal law or the law of another state.

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 am named as a perpetrator of a founded report of child abuse within the past five (5) years or 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. The cost of clearances shall be borne by the employing entity or program, activity or service.

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.

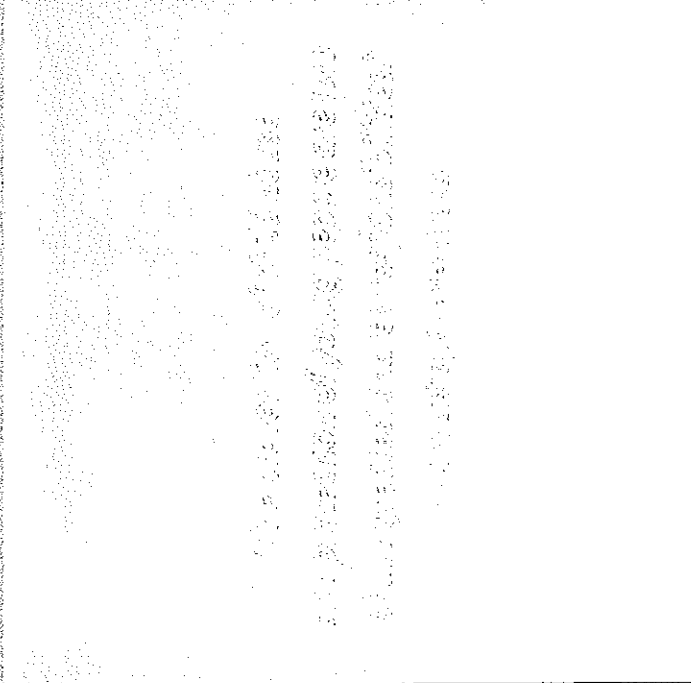
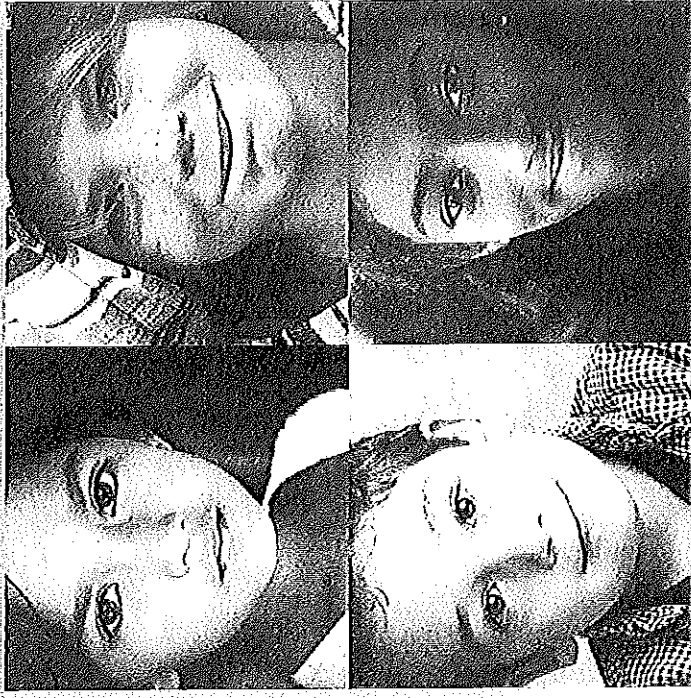
I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_

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

# Promise to Protect



## MANDATED REPORTING

Over the last decade the Archdiocese of Philadelphia has become a leader in developing safe environments for children. Through education and awareness, the Office of Child and Youth Protection assist parish families, Catholic school families and their communities with resources and services.

### Mandated Reporters

Under Pennsylvania law, any person, paid or unpaid, who works, volunteers and/or comes into direct contact with children in a program, activity or service is a mandated reporter and must immediately report suspicions of child abuse or neglect.

*Within the Archdiocese, this includes all members of clergy, parish and school staff, and volunteers who are likely to come into direct contact with children.*

Please remember the Office for Child and Youth Protection is available to help survivors of sexual abuse and their families. Victim Services can be reached at (888) 800-8780 or (215) 567-5680 or email at [philavac@archphila.org](mailto:philavac@archphila.org)



[www.childyouthprotection.org](http://www.childyouthprotection.org) | [www.archphila.org](http://www.archphila.org)



OFFICE FOR CHILD AND YOUTH PROTECTION | ARCHDIOCESE OF PHILADELPHIA

## What must be reported?

The Standard for reporting suspected abuse/neglect in Pennsylvania is a "reasonable cause to believe" that a child is the victim of abuse/neglect. First hand observation of abuse is not required.

## Indicators of Abuse (Source: PA Family Support Alliance)

As mandated reporters, it is important that you are able to recognize indicators of abuse.

## Signs of Physical Abuse

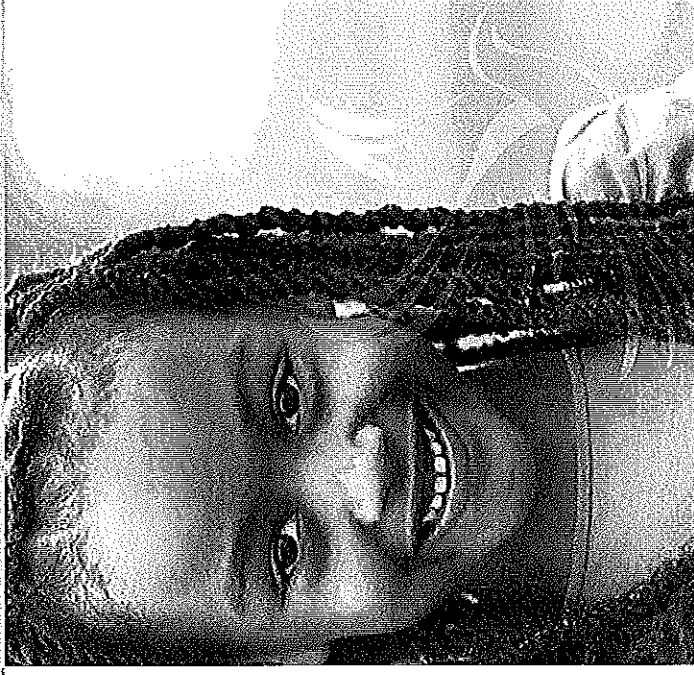
- Unexplained bruises, welts, human bite marks, bald spots
- Numerous bruises in various stages of healing
- Marks on many surfaces of the body
- Unexplained burns, especially cigarette or immersion burns
- Withdrawal or aggression—behavioral extremes
- Uncomfortable with physical contact
- Afraid to go home
- Dressed inappropriately for the weather
- Cringes when approached by an adult (fears getting hit)
- Overreacts to accidents such as spilling milk
- Does not want to talk about home life
- Extreme attachment to parents
- Extreme attentiveness to needs of parents

## Signs of Neglect or Psychological Abuse

- Unattended medical needs
- Consistent lack of supervision
- Persistent hunger, poor hygiene or inappropriate dress
- Distended stomach or emaciated body
- Delayed physical development
- Substance abuse
- Regularly displays fatigue or listlessness
- Steals food or begs
- Habit disorders (sucking, rocking, etc.)
- Passive or aggressive behavior extremes
- Neurotic traits such as sleep disorders or inhibition of play

## Signs of Sexual Abuse:

- Pain or itching in genital area
- Bruises or bleeding in external genitalia
- Frequent urinary or yeast infections
- Torn, stained or bloody underclothing
- Sexually transmitted diseases
- A child's report or self-disclosure
- Sexual knowledge beyond what is natural for a child
- Preoccupation with their body
- Acting out sexual behavior
- Withdrawal, chronic depression
- Self devaluation and lack of confidence
- Problems with bedtime or afraid to go to bed
- Bedwetting — especially if it begins in a child who has been dry



## How do I make a report if I suspect abuse?

If you suspect a child is being abused or neglected, the following three steps must be followed:

1. Call ChildLine at **800-932-0313**
2. Within 48-hours of your report, submit a written CY-47 report with the county Children & Youth services where the alleged abuse took place.
3. Notify the head of your institution immediately.





**ARCHDIOCESE OF PHILADELPHIA**

**Mandated Reporter Acknowledgement Form**

**For Priests, Deacons, Religious Pastoral Ministers, Administrators, Staff and Volunteers who have direct contact with children.**

By my signature below, I hereby acknowledge that I am now, or may in the future be, considered a mandated reporter under the laws of the Commonwealth of Pennsylvania based upon my ministry, work or status as a volunteer with the Archdiocese of Philadelphia, or an entity, school or organization affiliated with the Archdiocese of Philadelphia.

I further hereby acknowledge that I have received and reviewed the Archdiocese of Philadelphia's policies regarding mandated reporting effective November 2014 as outlined in the Mandated Reporting brochure.

I understand that my failure to report suspected child abuse in accordance with all applicable Pennsylvania laws and Archdiocesan policy may result in penalties being imposed upon me under Pennsylvania law and/or Archdiocesan policy.

**Print Full Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

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

**Place of Service:** \_\_\_\_\_