

DEPARTMENT OF PUBLIC WELFARE
ChildLine and Abuse Registry

PLEASE COPY AND ATTACH THIS DIRECTION SHEET TO EVERY APPLICATION DISTRIBUTED

Do not use Xeroxed copies of the Child Abuse History clearance. To reorder forms, please call (717) 783-6211.

DIRECTIONS

1. Type or print **CLEARLY AND NEATLY IN INK** Section I only.
2. Address must be **APPLICANT'S** current home address.
3. All information must be completed in full. (The form asks for all previous names, addresses, and household members **SINCE 1975**). This information must be provided to the best of your knowledge and belief. If necessary, attach additional pages.
4. Application must be **SIGNED**.
5. Enclose a **\$10.00 MONEY ORDER** for each application. No cash or personal checks accepted. Agency or business checks are acceptable.
6. **DO NOT** send any postage paid return envelopes.
7. Application should be placed in a **BUSINESS-SIZED OR LARGER** envelope prior to mailing.
8. **ONE BLOCK** must be checked for Purpose of Clearance. **DO NOT** check more than one block.
 - a) **Check the Volunteers Block** if performing a service (paid or unpaid) for organizations such as Big Brothers/Big Sisters, Boy Scouts, Little League, or churches. A **COPY** of your Criminal Record Check results obtained within the past year must be attached. **DO NOT** send original Criminal Record results. If you are not a Pennsylvania resident, you must also attach a copy of your FBI results obtained within the past year. **THIS BLOCK SHOULD NOT BE CHECKED FOR ANYONE VOLUNTEERING IN SCHOOLS.**
 - b) **Check the School Block** if seeking to have involvement within a school (public, private, vocational, technical, nursing) **FOR ANY REASON**
 - c) **Check the Foster Care/Block** if applying for foster parenting or custody of a child.
 - d) **Check the Adoption Block** if in the process or planning to adopt a child.
 - e) **Check the Child Care Block** if planning to work in a day care setting or if all other blocks do not apply
 - f) **Check the CWEP Block** if you are participating in a Department of Public Welfare training program. The signature and phone number of the County Assistance Representative is required.

CLEARANCE RESULTS WILL BE MAILED TO YOU WITHIN 14 DAYS FROM THE DATE THAT THE CLEARANCE IS RECEIVED IN OUR OFFICE. THERE WILL BE NO REPLACEMENTS AFTER 90 DAYS

FAILURE TO COMPLY WITH THE ABOVE INSTRUCTIONS WILL CAUSE CONSIDERABLE DELAY

Please contact the following for applicable criminal history requests:

PA Criminal Record Checks (SP4 164):	(717) 783-5494 or (717) 783-5492
FBI Cards for School Employees (FD 258):	(717) 783-3750