

**EAST LYCOMING SCHOOL DISTRICT**

**VOLUNTEER "POSITION" APPLICATION**

**Please complete this Volunteer "Position" Application if you meet the definitions**

Parent Name: \_\_\_\_\_ Child(ren) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Check School(s):

Ashkar \_\_\_ High School \_\_\_ Renn \_\_\_ Ferrell \_\_\_ Coach \_\_\_ Sport \_\_\_\_\_

Checklist of clearance materials needed for a Volunteer "Position":

- \_\_\_ Complete and sign this application
- \_\_\_ Complete and sign the Volunteer Responsibility Form
- \_\_\_ Complete the State Police Criminal Record Check (Act 34) <https://epatch.pa.gov>
- \_\_\_ Complete the Child Abuse Record Check (Act 151) <https://www.compass.state.pa.us/cwis/public/home>
- \_\_\_ Complete and sign the Fingerprint Waiver if you have lived in Pennsylvania for the past 10 years.
- \_\_\_ FBI Fingerprint (Act 114) If you are a chaperone of an overnight trip or you have not lived in PA for the past 10 years. See FBI Fingerprint (Act 114) instructions, use Vol **PDE** Service Code: 1KG6ZJ  
(If you would like reimbursement on this FBI clearance, send the receipt requesting it to the District Office)
- \_\_\_ Complete tuberculosis (TB) test at my own expense if: (1) volunteering more than 10 hours per week; (2) serving as a volunteer coach; OR (3) chaperoning an overnight trip. Single-day field trips or events do not require a TB test unless you meet criteria (1) or (2)

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in dismissal and may constitute a criminal offense under 18 Pa.C.S. § 4904."

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

All forms should be submitted to the District Office: 349 Cemetery St, Hughesville, PA 17737

Phone: 570-584-2131 or Fax: 570-584-5701

For more detailed information, visit [www.elsd.org](http://www.elsd.org)

