Child Abuse Clearance On-line Application instructions: Follow instructions per screenshots.

1. Log in to the PA child welfare information website:

| https://www.compas | s.state.pa.us/cwis/public/home |
|----------------------------------|--|
| PA pennsylvan | ia |
| Create Keystone ID: General Info | rmation |
| 1 🖕 General Informatio | 2 📫 n 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. 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 programs, the changes you make will apply to all programs that use the Keystone ID. Keep an eye out for the Keystone ID. Keep an eye out for 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 |

2. Click on "Create a New Account "





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



3. Follow instructions to create a Keystone ID

| Create Keystone II | D: Profile Information | | |
|---|---|--|--------|
| 1 | \Rightarrow | 2 | |
| G | eneral Information | Profile Information | |
| Required | | | |
| To create a new Ke | eystone ID, please provide the l | ollowing information: | |
| | | | |
| •Keystone ID | | (must be 6 to 10 characters) | |
| •First Name | Keystone ID | | |
| •Last Name | | | |
| •Date Of Birth | (MM/DD/YYYY) | | |
| •E-mail | | | |
| •Confirm E-mail | | | |
| Choose questions for which you Answers must be typed exactly Avoid using special characters (You cannot use the same questi Answer cannot be any phrase di | vill easily recall the answers; do not write down the the same way, every time. So, if you capitalize "Phi ş=%@) and punctuation (", -,) in your answers, on more than once. rectly from the question. | questions and answers, as this undermines their usefulness as a security tool. ladelphia" or if you write "Philadelphia PA" here, you must do so every time you use the question. | |
| •Security Question 1 | Please select a security question | | |
| •Answer | | | |
| Security Question 2 | Please select a security question | | |
| •Answer | | | |
| Security Question 3 | Please select a security question | T | |
| •Answer | | | |
| | | | |
| For security reaso | ns, please answer the following | question. | |
| Question Write in words | the number characters in United State | a of Amorica 7 | |
| Answer | the number characters in United State | s of Anterica : | |
| Allower | | | |
| | | | |
| | | Back Finish | Cancel |

4. Check your e-mail for your temporary password for your Keystone ID



Check your e-mail for your temporary password!

You have successfully created a Keystone ID and a temporary password has been e-mailed to you. For the safety of your personal and financial information, you cannot begin working until you retrieve this temporary password and sign back in to the system. You need to use this temporary password the first time you sign in. When you sign in for the first time, you will be required to create a personal password for future use.

Please click the Close Window button and login to your application.

Close Window

5. Log back in to the Child Welfare portal and click on Login (use the username and password that you just created)



Click on access my clearances



What Would You Like To Do Today?

Please select which account you would like to access.

ACCESS MY CLEARANCES ACCESS MY REFERRALS



6. Click on Continue (at the bottom)



Learn More

ABOUT THIS WEBSITE

This secure website is provided for individuals who want to have their **Pennsylvania Child Abuse History Clearance** processed online. The Pennsylvania Child Abuse History Clearance Check will provide the applicant information as to whether or not they are listed in the Pennsylvania statewide database as a perpetrator of child abuse.

FAQ Contact Us 🕄

FAQ Contact Us 3

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. However, please note that disclosure of your Social Security number is voluntary and threefore, 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 PUBLIC WELFARE SYSTEM.

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

7. Log in to the Keystone ID Portal



| Keystone Key | Self-service for Citizens |
|---|--|
| Usemame | Forgot Password |
| Password | Ledit Profile |
| LOGIN | Self-service for Commonwealth Employees |
| | Change CWOPA Password or Hint Questions |
| WARNING! US GOVERNMENT SYSTEM and DEPARTMI prohibited by Public Law 99-474 "The Computer Fraud and A MONITORING AT ALL TIMES and is not subject to ANY ex | ENT OF PUBLIC WELFARE SYSTEM. Unauthorized access is buse Act of 1985". Use of this system constitutes CONSENT TO opectation of privacy. Unauthorized use of or access to this system faderal law. This statement is being operated by the Decompany of |
| Public Welfare Security and Audits Unit. | evental naw, this statement is being posted by the Department of |

8. Click on Create Clearance Application



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 a code by the organization that is asking you to apply for a clearance, you will have a chance to enter the code on the 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 acceptec 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.

Information You Will Need

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
- Credit/Debit Card information for a \$10 application fee (or a payment code from the organization that is asking you to obtain a Pennsylvania Child Abuse History Clearance)

9. Click on Begin

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 C 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 >

10. VERY IMPORTANT!! Choose School Employee NOT governed by School Code for your reason.

| Part 1 Application Purpose | Application Purpose |
|--|--|
| Applicant Information Current Address Previous Address | 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. |
| Household Members | 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 |
| Part 2 | O 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. |
| Application Payment | \odot Foster Parent: Applying for purposes of providing foster care. |
| | \odot Prospective Adoptive Parent: Applying for the purpose of adoption. |
| | Employee of Child Care Services: Applying for the purposes of child-care services in the following (but not limited to): Child day-care centers; group day-care homes; family child-care homes; boarding homes for children; juvenile detention center services or programs for delinquent or dependent children; mental health services for children; services for children with intellectual disabilities; early intervention services for children; drug and alcohol services for children; and day-care services or programs that are offered by a school. |
| | O School Employee Governed by Public School Code: Applying as a school employee who is required to obtain background checks pursuant to Section 111 of the Public School Code. |
| | School Employee Not Governed by Public School Code: Applying as a school employee not governed by Section 111 of the provisions of the act of March 10, 1949 (P.L. 30, No. 14), known as the Public School Code of 1949. |
| | Self-employed provider of child-care services in a family child-care home: Applying for the purpose of providing child-care services in one's home (other than the child's own home) at any one time to four, five or six children who are not relatives of the caregiver. |
| | O Individual 14 years of age or older who is applying for or holding a paid position as an employee with a program, activity or service, as a person responsible for the child's welfare or having direct contact with children. |
| | Individual seeking to provide child-care services under contract with a child-care facility or program: Applying for the purpose of being able to provide child-care services as part of a contract or grant funded program. |

| <u>ick To My Account</u> | e-Clearance ID: 0000 | 00008345 | | DELETE APPLICATION | SAVE APPLICATION |
|---------------------------------------|---|---|--|--|---|
| Application Purpose | Applicant Info | rmation | | | |
| Applicant Information Current Address | Please provide some basi address where you wish t | c information about yourself o receive all emails regarding | and confirm that the e this application. | email address listed bel | ow is the email |
| Previous Address | First Name (required) | Middle Name | Last Name (rec | guired) Suffix | x |
| Household Members | Johanna | Eg., Scott | Gardiner | S | elect v |
|) Application Summary | Date of Birth (required) | Gender (required) | | | |
| eSignature | 09/10/1971 | Female | ~ | | |
| Application Payment | Your Social Security numb central register), 6344 (rel Information relating to far having contact with childr register to determine whe However, please note tha having your Social Securit | er is also being sought unde ating to Information relating mily day-care home residents en). The department will use ther you are listed as the per t disclosure of your Social Ser y number verified or used for | r 23 Pa.C.S. §§ 6336(a) to prospective child ca s), and 6344.2 (relating your Social Security ni rpetrator in an indicate curity number is volun r checking your child a | (1) (relating to Informat are personnel), 6344.1 (to Information relating umber to search the sta ed or founded report of tary and therefore, if yo buse history, we will sti | tion in statewide relating to g to other persons atewide central f child abuse. ou do not consent to ill process your |

Would you like to provide a Social Security Number (SSN)?

Yes No

11. Use your Etown College Email address

SSN



The email address below will be used for all emails regarding the submission and status of your application. If you would like to use a different email address, return to your PA Child Abuse History Clearance Account and click the Account Profile link provided at the top of the screen. This application will be available for you to continue from your account after your email has been updated. Click here to return to your PA Child Abuse History Clearance Account to update your email address.

Email Address

| gardinerj@etown.edu | |
|---------------------|--|
|---------------------|--|

Do you have any previous names or nicknames that you have used in the past or that you may be known by? (required)

0

Contact Information

+ ADD CONTACT NUMBER

| | Phone Type | Phone Number | Extension |
|-------------------------------|------------|--------------|-------------|
| | | | EDIT DELETE |
| <pre><PREVIOU</pre> | IS | | NEXT > |

12. Enter your home address here.

Current Address

Please enter your home and mailing address information on this page, and indicate your preferred certificate delivery method below.

Please keep a copy of this e-Clearance ID for future reference.

| Home Address | | | | | |
|---------------------------|------------------|---|---------------------|--------|---|
| | | | | | |
| United States | | ~ | | | |
| Address Line 1 (required) | | | Address Line 2 | | |
| Eg., 123 Main St | | | Eg., Apartment 101 | | |
| City (required) | State (required) | | Zip Code (required) | County | |
| | Pennsylvania | ~ | | Select | ~ |
| | | | | | |

13. IMPORTANT: Please make sure you enter your college mailing address here. (recommended)

| Mailing Address | ndences will be sent to you | at the m | ailing address entered h | nere. |
|--|-----------------------------------|-----------|--------------------------|-------------------------------------|
| Attention We can only send not your personal P.O. Bo | ices and correspondences (ox. | including | your clearance certifica | ite) to your residential address or |
| Is your mailing address | the same as your home ac | dress? | required) 🧿 | |
| Country (required) United States | | ~ | | |
| Address Line 1 require | a) | | Address Line 2 | |
| City (required) | State (required) Pennsylvania | ~ | Zip Code (required) | County Select × |

Certificate Delivery Method

Your clearance certificate will be available from your PA Child Abuse History Clearance Account. You have the ability to save and print your electronic certificate and use it as valid proof of clearance.

Note

The certificate will only be mailed to you if you select Yes below.

Would you also like to have a paper version of the certificate sent to your home or mailing address? (required)

Yes ONO

Important

You will continue to receive application updates and your certificate online, regardless of your answer.

<PREVIOUS

Previous Addresses

Please enter everywhere you have lived since 1975. If you cannot remember exact addresses, please enter as much information as you can.

+ ADD PREVIOUS ADDRESS Country Street Address City State Zip Code Country EDIT DELETE

Household Members

Please tell us about everyone with whom you have ever lived since 1975 or anyone with whom you are currently living. This includes, but is not limited to, your parents, guardians, spouses and/or siblings.

+ ADD HOUSEHOLD MEMBER Full Name Relationship To Applicant Current Age Gender EDIT PREVIOUS NEXT >

Application Summary

Below is a summary of the information you have entered so far. Please check your information for accuracy. If your information is not correct or needs to be updated, please click the edit button in the heading of the section that you would like to update and modify it as necessary.

14. Review all information to ensure that it is correct.

| Application Purpose | | EDI | r - |
|-----------------------|---|----------|------|
| Application Purpose | School Employment | | |
| Applicant Information | | FDIT | |
| Current Address | | EDIT |) |
| Previous Address | | EDIT |) + |
| Household Members | | EDIT |) + |
| REVIOUS | | | NEXT |
| oSignaturo | | | |
| | plication place eSign below by checking the acknowledge | mont and | |

I hereby certify that the information entered on this report 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). (required)

| Signa | iture (required) | | |
|-------------|------------------|--|--------|
| | | | |
| <pre></pre> | DUS | | NEXT > |

15. For payment code, Choose NO.

Application Payment

Did an organization provide a payment code for your application? (required) 🕄

Yes No

To submit a payment for your application, please click the "Make A Payment" button at the bottom of this page. You will be navigated to a secured external site to submit your payment. Once your payment is received, your application will be submitted and you will be directed to the Submission Confirmation page. If your application times out during your payment submission, it will be saved to your PA Child Abuse History Clearance Account where you may quickly retrieve and submit it.

You are allowed two attempts to make an electronic payment. After two failed electronic payment attempts, you will be required to submit a paper application.

Name on Credit/Debit Card

<PREVIOUS

Credit/Debit Card Number

01 - January







Credit/Debit Card Billing Street Address

Credit/Debit Card Billing Zip Code

< PREVIOUS

PAY NOW >

MAKE A PAYMENT >

Payment Completed

Your application has not been submitted yet! To submit your application, click the Finalize and Submit Application button below.

- Transaction ID: 8659B40B-D7FA-411F-8EFC-A630652C7A36
- Amount Paid: \$10.00
- Description: e-Clearance ID: 8345
- Payment Timestamp: Fri Jan 09 10:36:06 2015

FINALIZE AND SUBMIT APPLICATION >

16. Choose "Go to PA Child Abuse History Clearance Account"

Submission Confirmation

Success.

Your application (e-Clearance ID: 00000008345) has been successfully submitted!

Next Steps

Thank you for your submission. Please check your email for a confirmation notification that you may save for your own reconfirmation, contact ChildLine and Abuse Registry's Child Abuse History Clearance Unit at 1-877-371-5422.

You may view or check the status of your application from your PA Child Abuse History Clearance Account at any time. Once you will receive a notification via email to log in to your account and view the outcome/result of the application.

You can also log into your account at any time from the Child Welfare Portal homepage.

Now that you have submitted your application, what would you like to do?

LOG OUT

GO TO PA CHILD ABUSE HISTORY CLEARANCE ACCOUNT

SUBMIT ANOTHER CLEARANCE APPLICATION