

WISSAHICKON SCHOOL DISTRICT - SCHOOL VOLUNTEER DISCLOSURE STATEMENT

School Building(s): \_\_\_\_\_

Formal Legal Name: \_\_\_\_\_ Former name(s)/alias(es): \_\_\_\_\_  
First Name Full Middle Name Last Name

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

Home Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ DOB: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Employment Telephone Number: \_\_\_\_\_

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

**BY CHECKING THIS BOX**, I affirm under the penalty of perjury that I have not committed, pled guilty to and/or been convicted of, nor am I presently charged with, any of the following offenses, including but not limited to the attempt, solicitation or conspiracy to commit any of these offenses

(1) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

- Chapter 25 (relating to criminal homicide)
Section 2702 (relating to aggravated assault)
Section 2901 (relating to kidnapping)
Section 2709.1 (relating to stalking)
Section 2902 (relating to unlawful restraint)
Section 2910 (relating to luring a child into a motor vehicle or structure)
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 3124.2 (relating to institutional sexual assault)
Section 3125 (relating to aggravated indecent assault)
Section 3126 (relating to indecent assault)
Section 3127 (relating to indecent exposure)
Section 3129 (relating to sexual intercourse with an animal)
Section 4302 (relating to incest)
Section 4303 (relating to concealing the death of a child)
Section 4304 (relating to endangering welfare of child)
Section 4305 (relating to dealing in infant children)
A felony offense under Section 5902(b) (relating to prostitution and related offenses)
Section 5903(c) or (d) (relating to obscene and other sexual materials and performances)
Section 6301(a)(1) (relating to corruption of minors)
Section 6312 (relating to sexual abuse of children)
Section 6318 (relating to unlawful contact with minor)
Section 6319 (relating to solicitation of minors to traffic drugs)
Section 6320 (relating to sexual exploitation of children)

(2) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64) known as "The Controlled Substance, Drug, Device and Cosmetic Act."

(3) An offense SIMILAR IN NATURE to those crimes listed in clauses (1) and (2) 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.

**BY CHECKING THIS BOX**, I affirm that I have not committed, pled guilty to and/or been convicted of, nor served a sentence for, any offense graded as a felony offense of the first, second or third degree, within the past ten (10) years.

**BY CHECKING THIS BOX**, I affirm that I have not committed, have not pled guilty to and/or been convicted of, nor served a sentence for, any offense graded as a misdemeanor of the first degree, within the past five (5) years.

**BY CHECKING THIS BOX**, I affirm that I have not on more than one occasion pled guilty to and/or been convicted of any offense under 75 Pa. C.S. Section 3802(a), (b), (c) and/or (d) (relating to driving under the influence of alcohol or controlled substance) that was graded as a misdemeanor of the first degree, or, if I have so pled guilty and/or been convicted of such offense(s) on more than one occasion, that I have not pled guilty to and/or been convicted of, nor served a sentence for any of those convictions within the past three (3) years.

**BY CHECKING THIS BOX**, I affirm that I have not been named as a perpetrator of a founded report of bodily injury, sexual abuse, or sexual exploitation of a child.

**BY CHECKING THIS BOX**, I affirm that I have resided in the Commonwealth of Pennsylvania continuously for the past 10 years.

**BY CHECKING THIS BOX**, I affirm that I have been provided with a copy of, and have read and understand, and agree to comply with the District's policy and administrative guidelines regarding School Volunteers.

**BY CHECKING THIS BOX**, I affirm that I will NOT be volunteering 10 or more hours per week in direct contact of children. *Volunteers working 10 or more hours per week with direct contact of children are required to undergo Tuberculosis Testing. If the box is unchecked, you will not be able to volunteer until proof of testing is received.*

By signing this form, I certify that I have provided true and correct information on this form to the best of my knowledge, information and belief. I understand that my verification of the accuracy of this information on this form is made subject to the penalties of 18 Pa. C.S. §4904, relating to unsworn falsification to authorities.

Date

Signature of School Volunteer