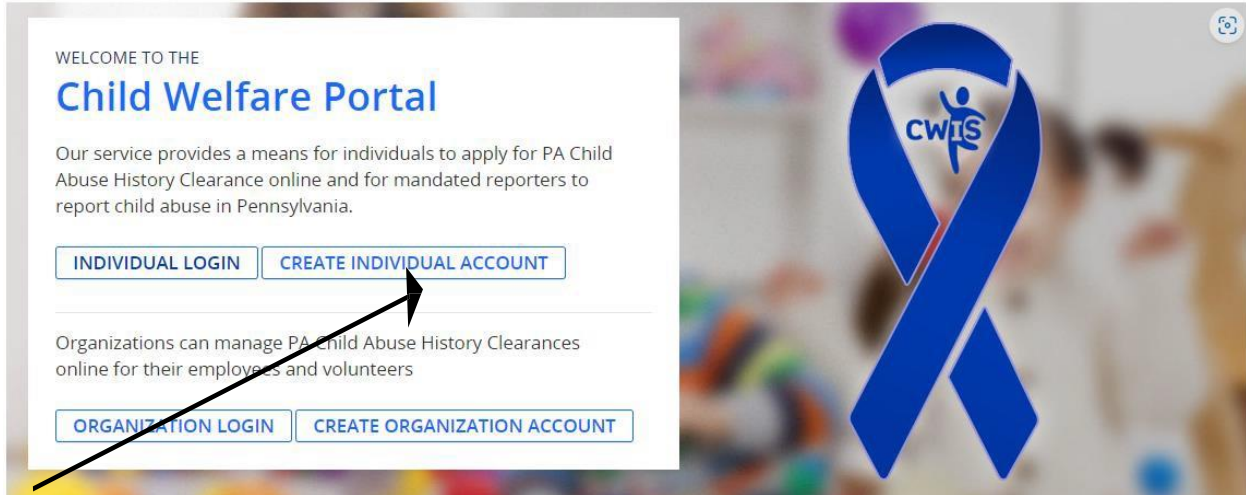


CHILD ABUSE CLEARANCE INSTRUCTIONS

[Pennsylvania Child Welfare Information Solution \(state.pa.us\)](http://www.compass.state.pa.us)

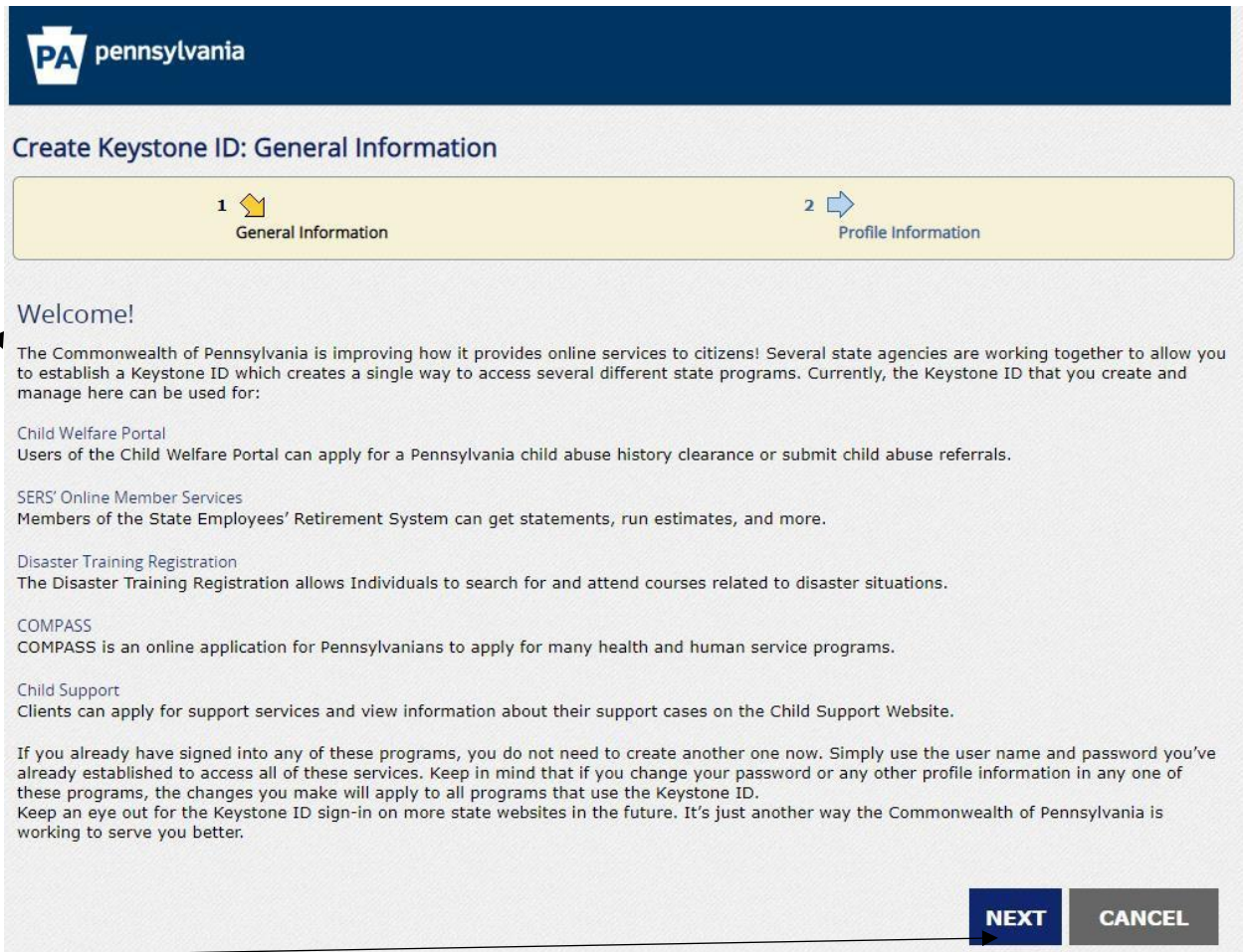
Type link in web browser.

<http://www.compass.state.pa.us/cwis>



Click here.

Read the information.



Click here.

You must fill out all information that has a red * in front of it. This information is required.

PA pennsylvania

Create Keystone ID: Profile Information

1 General Information 2 Profile Information

*** = Required**

To create a new Keystone ID, please provide the following information:
 Note: Please ensure the information provided below is accurate. Once the Keystone ID is created, you will not be able to update the Keystone ID, First Name, Last Name or Date of Birth associated with this ID.

* Keystone ID (must be 6 to 64 characters)

* First Name

* Last Name

* Date Of Birth (MM/DD/YYYY)

* E-mail

* Confirm E-mail

To ensure online security, please select and provide answers for security questions. These questions will be used if you forget your password.
Security Question Tips
 Choose questions for which you will easily recall the answers; do not write down the questions and answers, as this undermines their usefulness as a security tool.
 Avoid using special characters (\$#@!) and punctuation (' , -) in your answers.
 You cannot use the same question more than once.
 Answer cannot be any phrase directly from the question.

* Security Question 1

* Answer

* Security Question 2

* Answer

* Security Question 3

* Answer

For security reasons, please answer the following question.

Question Which of the following is the smallest: nine, 67, 2 or twenty-seven?

* Answer

Please review the information provided and click Finish.

BACK FINISH CANCEL

Red *=required.

Once you done filling out the information click

- Compass will then take you to the log in screen and send you a temporary password. You will need to check your email for this password. If you do not see your password in you, inbox check your spam folder.
- Log in using your Keystone ID and your temporary password.
- Once you have logged in Compass will prompt you to change your password. After changing your password, you will now log in with your Keystone ID and your new password.

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

WELCOME TO THE

Child Welfare Portal

Our service provides a means for individuals to apply for PA Child Abuse History Clearance online and for mandated reporters to report child abuse in Pennsylvania.

INDIVIDUAL LOGIN

CREATE INDIVIDUAL ACCOUNT

Organizations can manage PA Child Abuse History Clearances online for their employees and volunteers

ORGANIZATION LOGIN

CREATE ORGANIZATION ACCOUNT



Click Individual Login.



pennsylvania
CHILD WELFARE INFORMATION SOLUTION

What Would You Like To Do Today?


Please select which account you would like to access.

ACCESS MY CLEARANCES

ACCESS MY REFERRALS

Click Access My

Read.

 **pennsylvania**
CHILD WELFARE INFORMATION SOLUTION

FAQ Contact Us

Need Help? Contact the CWIS Support Center at 1-877-343-0494

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.

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 (5 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.

Providing your Social Security number may enable the Department to expedite the review of your request for a clearance certificate. If you do not provide your Social Security number additional levels of identity verification may be required by ChildLine staff, reducing the chance of automatic processing of your request.

However, please note that disclosure of your Social Security number is voluntary and therefore, 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!

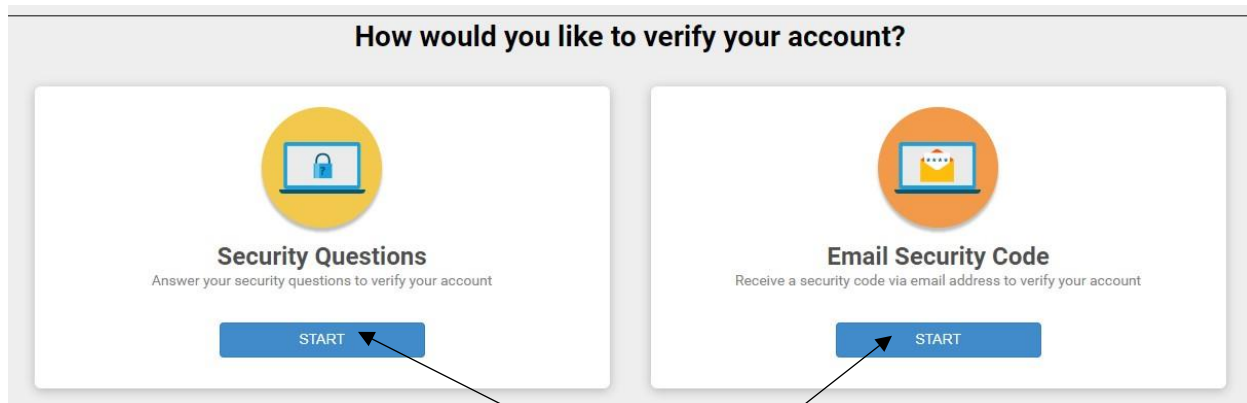
US GOVERNMENT SYSTEM and DEPARTMENT OF HUMAN SERVICES.
Unauthorized access prohibited by Public Law 99-474 "The Computer Fraud and Abuse Act of 1996". Use of this system constitutes CONSENT TO MONITORING AT ALL TIMES and is not subject to ANY expectation of privacy.

CONTINUE >

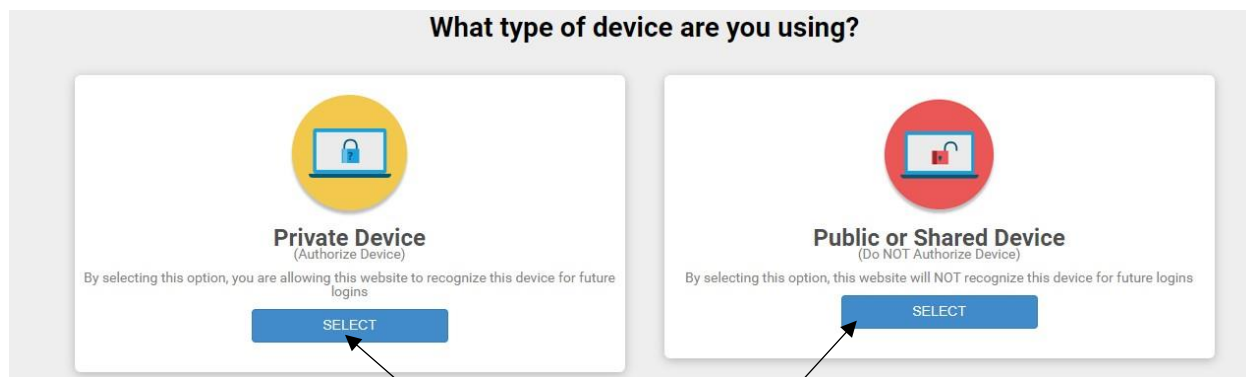
Keystone Logon.



Type in your username and password then press Login



Every time you log in you will need to verify your account. You will either answer your security questions or have an email security code sent to your email.



Choose a Private Device or Public or Shared Device.

Read.

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 an authorization code by the organization that is asking you to apply for a clearance, you will have a chance to enter it on the application 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 accepted. 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. Your Child Abuse History Certification is valid for 60 months.

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
- Applicants that do not meet the volunteer application criteria or volunteers who have already received a volunteer certification free of charge within the previous 57 months will need to provide either credit/debit card information for an \$13.00 application fee or an authorization code from the organization that is asking you to obtain a Pennsylvania Child Abuse History Certification.

Volunteer Applicants

As a volunteer applicant you are permitted to receive one certification free of charge every 57 months. In order to submit a volunteer application without a payment, you are required to affirm that you have not already received a paper or electronic volunteer certification free of charge within the previous 57 months.

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 . 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 →](#)

Click Begin.

You will now complete Part 1 and Part 2.

***Choose the purpose
"Public School
Employee Governed
by Public School
Code"**

[Back To My Account](#)

Part 1

- Application Purpose
- Applicant Information
- Current Address
- Previous Address
- Household Members
- Application Summary

Part 2

- eSignature
- Application Payment

Applicant Information

Please provide some basic information about yourself and confirm that the email address listed below is the email address where you wish to receive all emails regarding this application.

Fill out all **required** information.

| | | | |
|---|----------------------------------|-------------------------------------|----------------------|
| First Name <small>(required)</small> | Middle Name | Last Name <small>(required)</small> | Suffix |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Date of Birth <small>(required)</small> | Gender <small>(required)</small> | | |
| <input type="text"/> | <input type="text"/> | | |

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.

Providing your Social Security number may enable the Department to expedite the review of your request for a clearance certificate. If you do not provide your Social Security number additional levels of identity verification may be required by ChildLine staff, reducing the chance of automatic processing of your request.

However, please note that disclosure of your Social Security number is voluntary and therefore, 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.

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

Answer
yes or no.

Yes No

Provide your SSN.

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.](#)

Add your email address.

Email Address

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



Answer yes or no.

Yes No

Previous Names/Nicknames

Please enter any nicknames or previous names that you have used or may have been known by.

Add info.

[+ ADD PREVIOUS NAMES/NICKNAMES](#)

| | First Name | Middle Name | Last Name | Suffix |
|-----------------------|------------|-------------|-----------|--------|
| <input type="radio"/> | | | | |

[EDIT](#) [DELETE](#)

Contact Information

Add Contact #.

[+ ADD CONTACT NUMBER](#)

| | Phone Type | Phone Number | Extension |
|-----------------------|------------|--------------|-----------|
| <input type="radio"/> | | | |

[EDIT](#) [DELETE](#)

[← PREVIOUS](#)

[NEXT →](#)

Click next.

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

Country (required)

Address Line 1 (required)

Address Line 2

City (required)

State (required)

Zip Code (required)

County

Fill out all **required** information.

Mailing Address

All notices and correspondences will be sent to you at the mailing address entered here.

Attention

We can only send notices and correspondences (including your clearance certificate) to your residential address or your personal P.O. Box.

Is your mailing address the same as your home address? (required)

Yes No

Answer yes or no.

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 No

Answer yes or no.

Important

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

← PREVIOUS

NEXT →

Click next.

You must add every address where you have ever lived. Each time you would like to add an address, click the plus sign.

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 | County |
|-----------------------|---------------|----------------|------|-------|----------|--------|
| <input type="radio"/> | United States | | | | | |
| <input type="radio"/> | United States | | | | | |
| <input type="radio"/> | United States | | | | | |
| <input type="radio"/> | United States | | | | | |
| <input type="radio"/> | United States | | | | | |

[EDIT](#) [DELETE](#)

[← PREVIOUS](#)


[NEXT →](#)

Once you are finished click next to continue.

You must list everyone that you have ever lived with. To add each person click on the plus sign.

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 |
|-----------------------|-----------|---------------------------|-------------|--------|
| <input type="radio"/> | | | | |
| <input type="radio"/> | | | | |
| <input type="radio"/> | | | | |
| <input type="radio"/> | | | | |
| <input type="radio"/> | | | | |
| <input type="radio"/> | | | | |
| <input type="radio"/> | | | | |

[EDIT](#) [DELETE](#)

[← PREVIOUS](#)

[NEXT →](#)

Once you are finished click next to continue.

Application Payment

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

Yes No

Click no.

To submit a payment for your application, please click the 'Make A Payment' button at the bottom of this 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.

Read.

When you select the 'Make a Payment' button, 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.

Click make a payment.

[← PREVIOUS](#)

[MAKE A PAYMENT →](#)



Review Your Order

e-Clearance ID:

Total Amount: USD 13.00

[← Return to CWIS Citizen](#)

Pay With Your Credit Card

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

Credit/Debit Card Number



Credit/Debit Card Expiration Month and Year (MMYY)

Credit/Debit Verification Code

CVV2 is the Visa term for the 3 digit security code on the back of the credit card (Visa and MasterCard). For American Express, it is 4 digits and located on the front.



Credit/Debit Card Billing Street Address

Credit/Debit Card Billing Zip Code

Verification

I'm not a robot



Click.

[Pay With Your Credit Card](#)

Your private information is secured using SSL (Secure Sockets Layer), the leading security protocol on the Internet. Information is encrypted and exchanged with an https server.

We respect your privacy. We will pass your name, address or e-mail address on only to the merchant.

Fill out all credit card information.

You will receive an email when your application is processed. Sign back into your account to view your clearance.

My PA Child Abuse History Clearances

[CREATE CLEARANCE APPLICATION](#)
[ADD APPLICATION TO ACCOUNT](#)

Status of Submitted Applications

You can modify an application with an issued certificate, if an error exists on the current certificate. To resubmit an application, click the Resubmit button below.

Warning

It is recommended that you DO NOT save your certificate on a public computer. Doing so could leave your personal information open for others to view! Only save your certificate to a trusted computer to protect your information.

e-Clearance ID: 

[RESUBMIT](#)

Purpose **School Employee Governed by Public School Code**

Created On

Updated On

Your application has been processed. [To view the result, click here.](#)

Verified On

Click here to download your clearance.

Download the PDF of your background check and attach it to an email to send to adulted@gactc.edu. If you prefer to mail the document, address to:

Greater Altoona Career & Technology Center
 Continuing Education
 1500 Fourth Avenue
 Altoona, PA 16602