



BLOOMSBURG UNIVERSITY OF PENNSYLVANIA APPLICANT
ACKNOWLEDGEMENT AND CONSENT FOR CRIMINAL BACKGROUND CHECK

1. _____ hereby acknowledge and consent to the following:
(PRINT NAME)
2. I have applied for a position with Bloomsburg University and have been advised that all identified applicants are required to satisfy the requirements of the Pennsylvania Child Protective Services Law (CPSL).
3. I acknowledge that CPSL requires a Pennsylvania State Police Criminal History Report, Pennsylvania Department of Human Services Child Abuse History Clearance and a Federal Bureau of Investigation Criminal History Report.
4. I further acknowledge that I will provide the original Federal Bureau of Investigation Criminal History Report (fingerprint report) to Human Resources at Bloomsburg University.
5. I will use the provided payment code to submit my Pennsylvania Department of Human Services Child Abuse History Clearance report electronically, which will allow Bloomsburg University access to the final report.
6. I understand that Human Resources at Bloomsburg University will run the Pennsylvania State Police Criminal History report (e-PATCH) on my behalf and I am providing the following information for them to do so.

Full Name (print) _____
Date of Birth _____
Full Social Security Number _____
Aliases and/or Maiden Name _____
Race _____

Race is a required field in the Pennsylvania State Police application for the Criminal History Report. Failure to provide race on this form will result in race being reported as unknown to the Pennsylvania State Police.

7. I understand that CPSL permits (but does not require) Bloomsburg University to hire me on a provisional basis for an approved time period not to exceed ninety (90) days.
8. I understand that during any authorized period of provisional employment/participation, I will not be permitted to work alone with children and must work in the immediate vicinity of a permanent Bloomsburg University employee.
9. I understand that Bloomsburg University may immediately terminate my provisional employment/participation should the Pennsylvania State Police, Pennsylvania Department of Human Services and/or the Federal Bureau of Investigation be unable to provide the required reports within the approved provisional period.

SIGNATURE

DATE

E-MAIL ADDRESS

TELEPHONE NUMBER

APPLICANT FOR:
FACULTY STAFF STUDENT EMPLOYMENT VOLUNTEER

EVENT/DEPARTMENT: _____
Approved by University Legal Counsel April 13, 2015