

APPLICANT DISCLOSURE AFFIDAVIT

Our agency screens prospective employees and volunteers to evaluate whether an applicant poses a risk of harm to the children and youth it serves. Information obtained is not an automatic bar to employment or volunteer work but is considered in view of all relevant circumstances. This disclosure is required to be completed by applicants for positions in order to be considered. Any falsification, misrepresentation, or incompleteness in this disclosure is grounds for disqualification or termination.

APPLICANT: _____ *Social Security #:* _____
Please print complete name and Social Security Number

The undersigned applicant affirms that **I HAVE NOT AT ANY TIME** (whether as an adult or juvenile):

YES	NO	<i>(Initial yes or no and provide brief explanation for a yes answer).</i>
_____	_____	Been convicted of or accused of or investigated because of
_____	_____	Pleaded guilty to (whether or not resulting in a conviction)
_____	_____	Pleaded nolo contendere or no contest to
_____	_____	Admitted
_____	_____	Have had any judgment or order rendered against me (whether by default or otherwise)
_____	_____	Entered into any settlement of an action or claim of
_____	_____	Had any license, certificate, or employment suspended, revoked, terminated, or adversely affected because of
_____	_____	Been diagnosed as having or treated for any mental or emotional condition arising from
_____	_____	Resigned under threat of termination of employment or volunteer work for

any allegation, any conduct, matter, or thing (irrespective of the formal name thereof) constituting or involving (whether under criminal or civil law of any jurisdiction): **NOTE:**

If you were a victim of any crime you need not answer questions pertaining to that incident.

YES	NO	<i>(Initial yes or no and provide brief explanation for a yes answer below).</i>
_____	_____	Any felony
_____	_____	Rape or other sexual assault or sexual harassment
_____	_____	Drug/alcohol-related offenses or accusations
_____	_____	Abuse of a minor or child, whether physical or sexual
_____	_____	Incest
_____	_____	Kidnapping, false imprisonment, or abduction
_____	_____	Sexual harassment
_____	_____	Sexual exploitation of a minor
_____	_____	Sexual conduct with a minor
_____	_____	Annoying/molesting a child
_____	_____	Lewdness and/or indecent exposure
_____	_____	Lewd and lascivious behavior
_____	_____	Obscene literature
_____	_____	Assault, battery, or other offense involving a minor or adult
_____	_____	Endangerment of a child

Applicant Disclosure Affidavit (continued)

YES	NO	<i>(Initial yes or no and provide brief explanation for a yes answer below).</i>
_____	_____	Any misdemeanor felony offense classification involving a minor or to which a minor was a witness
_____	_____	Unfitness as a parent or custodian
_____	_____	Removing children from a state or concealing children in violation of a law or court order
_____	_____	Restrictions or limitations on contact or visitation with children or minors
_____	_____	Any theft related offense

EXCEPT THE FOLLOWING:

(If you answered yes to any of the above, please explain: if none, write "None").

DESCRIPTION

DATES

VERIFICATION

I, _____, hereby certify that I am the _____
in the above captioned matter and that the facts set forth in the foregoing _____,
are true and correct to the best of my knowledge, information and belief, and are made subject to the
penalties of 18 Pa.C.S.A. S4904 relating to unsworn falsification to authorities.

DATE

SIGNATURE

NOTARY SEAL