

Volunteer Application

Contact Information			
Name		Prefer to be called	
Address			
City, State, Zip Code			
Phone		Cell Phone	
E-mail		Best time to contact you	

The Ephrata Cloister has a wide variety of volunteer opportunities. Look at the Volunteer Handbook for more information about the different volunteer jobs and check off your areas of interest.	
	Tour Guide: provides 45 minute tours of the historic site.
	Front Desk Associate: processing admissions and assisting visitors with information about the area
	Gift Shop Associate: selling merchandise, packing, unpacking, cleaning shelves
	Education Programs: school tours, site wide public events
	Special Events Assistant: refreshments, set-up and clean-up of evens, parking assistance, directional assistance, bask sale assistance
	Wedding Assistant: assist bridal party and monitor site during and after service; provide security
	Maintenance/Gardens: weeding and maintaining gardens; lawn maintenance

Availability – please list the range of hours when you are available to volunteer, am. and/or p.m.			
Sunday		Thursday	
Monday		Friday	
Tuesday		Saturday	
Wednesday		other	

Work Experience	
Briefly describe your work experiences, skills, and inters that would transfer into your volunteer services at the historic Ephrata Cloister	
Briefly describe previous volunteer experience:	
Personal Reference (other than a relative)	Name:
	Relationship:
	Daytime phone number:

Emergency Contact Information *release is optional and will be kept confidential			
*Name		*Relationship	
*Phone		*Cell Phone	

Medical Information *release is optional and will be kept confidential	
*Allergies	
*Physician	
*Please list any medical conditions that might affect your ability to perform your duties or that your supervisor should be aware of.	

Background Clearances

An applicant for a volunteer position who is 14 years and older, who has direct and regular contact with a child, particularly school and education program volunteers, special events assistants, and tour guide volunteers, is **required to obtain** the following **upon commencement of service**:

1. A **Pennsylvania State Police Criminal Background Check** completed by the Pennsylvania State Police (PSP); located here: <https://epatch.state.pa.us/Home.jsp>
2. A **child abuse history check** conducted by the Pennsylvania Department of Public Welfare located here: <https://www.compass.state.pa.us/CWIS> or (1-877-371-5422) For questions regarding your Pennsylvania Child Abuse History Clearance Application, contact ChildLine at 1-877-371-5422.

These two background checks must be renewed every 36 months.

Additionally, a **fingerprint based federal criminal history (FBI) Clearance** is required if the volunteer is applying for a paid position and/or the volunteer has lived outside of Pennsylvania in the last 10 years.

Volunteers are not required to obtain the FBI clearance if they have been a continuous resident of Pennsylvania for the past 10 years, but *must* sign the **Disclosure Statement Application for Volunteers** contained in the **Volunteer Handbook** appendix confirming that they cannot be disqualified from service based upon a past conviction of an offense in other states that would prohibit their selection as a volunteer.

Volunteers are required to obtain updated clearances as follows:

- Within 36 months of the date of the most recent clearance;
 - By July 1, 2016 if the clearance is older than 36 months or
 - By July 1, 2016 if they were approved as a volunteer before July 1, 2015
- and had not received a clearance because they previously were not required to obtain clearances.

Volunteers are responsible for taking the personal initiative to obtain background checks and provide copies of background checks to the Ephrata Cloister Associates.

Renewal Requirement:

Clearances less than three months old will be considered acceptable and compliant. If the Ephrata Cloister Associates chose to renew all clearances at the same time, the date of the oldest clearance rather than the most recent would be used.

DISCLOSURE STATEMENT APPLICATION FOR VOLUNTEERS
Required by the Child Protective Service Law
23 Pa. C.S. Section 6344.2 (relating to volunteers having contact with children)

I swear/affirm that I am seeking a volunteer position and **AM NOT** required to obtain a clearance through the Federal Bureau of Investigation, as:

- the position I am applying for is unpaid; **and**
- I have been a resident of Pennsylvania during the entirety of the previous ten-year period.

I swear/affirm that I have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

I swear/affirm that I have not been convicted of any of the following crimes under Title 18 of the Pennsylvania consolidated statutes or of offenses similar in nature to those crimes 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.

Chapter 25 (relating to criminal homicide)
Section 2702 (relating to aggravated assault)
Section 2709 (relating to stalking)
Section 2901 (relating to kidnapping)
Section 2902 (relating to unlawful restraint)
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 3125 (relating to aggravated indecent assault)
Section 3126 (relating to indecent assault)
Section 3127 (relating to indecent exposure)
Section 4302 (relating to incest)
Section 4303 (relating to concealing death of child)
Section 4304 (relating to endangering welfare of children)
Section 4305 (relating to dealing in infant children)
Section 5902(b) (relating to prostitution and related offenses)
Section 5903(c) (d) (relating to obscene and other sexual material and performances)
Section 6301 (relating to corruption of minors)
Section 6312 (relating to sexual abuse of children), or an equivalent crime under Federal law or the law of another state.

I have not been convicted of a felony offense under Act 64-1972 (relating to the controlled substance, drug device and cosmetic act) committed within the past five years.

I understand that I shall not be approved for service if I am named as a perpetrator of a founded report of child abuse within the past five (5) years or have been convicted of any of the crimes listed above or of offenses similar in nature to those crimes 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.

I understand that if I am arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or am named as perpetrator in a founded or indicated report, I must provide the administrator or designee with written notice not later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the Statewide database.

I understand that if the person responsible for employment decisions or the administrator of a program, activity or service has a reasonable belief that I was arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or was named as perpetrator in a founded or indicated report, or I have provided notice as required under this section, the person responsible for employment decisions or administrator of a program, activity or service shall immediately require me to submit current clearances obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of clearances shall be borne by the employing entity or program, activity or service.

I understand that if I willfully fail to disclose information required above, I commit a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position.

I understand that the person responsible for employment decisions or the administrator of a program, activity or service is required to maintain a copy of my clearances.

I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name: _____ Signature: _____

Witness: _____ Signature: _____

Date: _____

PHOTOGRAPH RELEASE

I _____ of _____,
address

hereby grant to the Pennsylvania Historical and Museum Commission (PHMC) the irrevocable right, authority, and permission to copyright, use, re-use, publish, and republish photographic portraits, pictures, or images of me. I have read this release in its entirety prior to its execution and fully understand the contents thereof.

signature date

This release includes the right to use the photograph(s) at any time in the future, throughout the world in any manner PHMC so chooses in any medium now known or later developed. This also includes any photograph or image in which I may be intact or in part, composite or distorted, in character, or form, without restriction or limitation as to changes or transformations in conjunction with my own or fictitious name, or reproduction hereof in color or otherwise, made through any and all media now or hereafter known for illustration, art, promotion, advertising, trade or any other purpose whatsoever. This further includes, without limitation, use on PHMC's website, in educational and promotional materials, brochures, and any other promotional or advertising materials PHMC wishes. I acknowledge that PHMC is under no obligation to use my photograph(s). I also grant to PHMC the right and authority to modify the photograph(s) or image(s) of me as necessary in PHMC's sole discretion.

I agree that there will be no fees, commissions, or royalties paid to me for the use of my photograph(s) or image(s). I hereby relinquish any right that I may have to impact or approve any use thereof or to examine or approve the completed work(s), product(s), or advertising copy of printed material(s) that may be used in conjunction therewith or the use to which it may be applied.

I hereby release, discharge, and hold the Commonwealth, PHMC, its officials, employees, agents, or representatives, harmless from and indemnify against any and all claims, demands, or actions based upon arising out of, or in connection with the use of said photograph(s) or image(s) including, without limitation, any and all claims for libel and invasion of privacy. I further agree to pay any and all other expenses including but not limited to attorney's fees in connection therewith. I also release, discharge, and agree to hold the Commonwealth, PHMC, its officials, employees, agents, and representatives harmless from and indemnify against any and all claims, demands, actions, or liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of said picture(s), or photograph(s), or image(s) or in any subsequent processing thereof, as well as any publication thereof. This agreement shall be binding upon me and my heirs, legal representatives, and assigns.