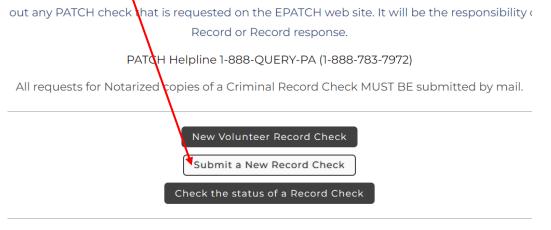
## GUIDE FOR COMPLETING THE ACT 34 PENNSYLVANIA STATE POLICE BACKGROUND CHECK

- Visit the Pennsylvania Access to Criminal History website at <u>https://epatch.state.pa.us</u> to complete a "Criminal History Record Check."
- 2. Click on 'Submit a New Record Check' on the home page. An online account is not needed.

# Welcome to Pennsylvania Access To Criminal History



### 3. Read the Terms & Conditions and then click accept.

#### Pennsylvania State Police Notary Policy

Criminal history responses requiring notarization can only be notarized by a Pennsylvania State Police notary. The notary seal is considered valid at the time of notarization. Should proof of the notary public's appointment be required, please contact the Secretary of the Commonwealth via mail at 210 North Office Building, Harrisburg, PA 17120 or by telephone at (717) 787-5280.

Notary Public reappointment occurs 2 to 3 months prior to expiration of their commission. If the expiration of the notary's commission interferes with the process in which you require a notarized criminal history response, it will be necessary for you to submit a new request for criminal history record check.

#### Do you accept these Terms and Conditions:



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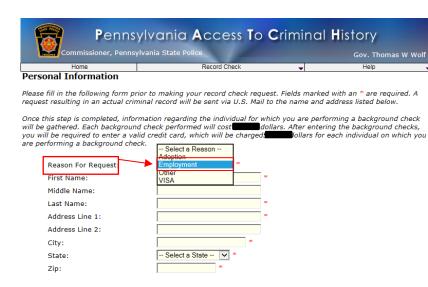
4. Please select 'Individual Request' and then click continue.

| Pennsylvania Access To Criminal History |                                                                                                                      |                    |  |  |
|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------|--------------------|--|--|
| Commissioner Tyree C                    | C. Blocker                                                                                                           | Gov. Thomas W Wolf |  |  |
| Home                                    | Record Check                                                                                                         | ✓ Help             |  |  |
| Requestor Details                       | Individual Request                                                                                                   |                    |  |  |
|                                         | ed by an individual who is requesting and pay<br>tter will show the individual as the requestor<br>© Company Request |                    |  |  |

A Company Request is to be used by a business or organization that is requesting and paying for the Criminal History Record Check. The PATCH certification letter will show the company as the requestor of the Criminal History Record Check.

CONTINUE

5. Please select 'Employment' in the drop down box under the reason for request.



## 6. Fill in the remaining fields and then click next.

| Penns<br>Commissioner, Penns |              | To Criminal History<br>Gov. Thomas W Wo |      |  |
|------------------------------|--------------|-----------------------------------------|------|--|
| Home                         | Record Check | -                                       | Help |  |
| Personal Information         |              |                                         |      |  |

Please fill in the following form prior to making your record check request. Fields marked with an \* are required. A request resulting in an actual criminal record will be sent via U.S. Mail to the name and address listed below.

Once this step is completed, information regarding the individual for when the performing a background check will be gathered. Each background check performed will cost **\$ 8.00** dollars. After entering the background checks, you will be required to enter a valid credit card, which will be charged **\$ 8.00** dollars for each individual on which you are performing a background check.

| Reason For Request: | Employment 🗸 *     |
|---------------------|--------------------|
| First Name:         | *                  |
| Middle Name:        |                    |
| Last Name:          | *                  |
| Address Line 1:     | *                  |
| Address Line 2:     |                    |
| City:               | *                  |
| State:              | Select a State 🗸 * |
| Zip:                | *                  |
| Country:            | United States 🗸 *  |
| Email Addr:         |                    |
| Phone Number:       | *                  |
| Fax Number:         |                    |
|                     |                    |
|                     | Cancel Next >      |

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7. On the next screen, you will be asked to review your personal information for accuracy. If the information is correct, click "Proceed."

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Penns                                                                  | ylvania <b>A</b> ccess <b>T</b> o <b>(</b>                                                 | riminal            | <b>H</b> istory            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------|----------------------------|
| Personal Information Review Please verify the following information prior to clicking the "Proceed" button. If you need to make changes, click the "Back" button. Once this step is completed, information regarding the individual for which you are performing a background check will be gathered. Each background check performed will cost background checks, you will be required to enter a valid credit card, which will be charged dollars for each individual on which you are performing a background check. Reason For Request: Employment |                                                                        |                                                                                            |                    | Gov. Thomas W Wolf         |
| Please verify the following information prior to clicking the "Proceed" button. If you need to make changes, click the "Back" button.<br>"Back" button.<br>Once this step is completed, information regarding the individual for which you are performing a background check will be gathered. Each background check performed will cost background checks, you will be required to enter a valid credit card, which will be charged dollars for each individual on which you are performing a background check.<br>Reason For Request: Employment     | Home                                                                   | Record Check                                                                               | •                  | Help 🚽                     |
| "Back" button.<br>Once this step is completed, information regarding the individual for which you are performing a background check<br>will be gathered. Each background check performed will cost dollars. After entering the background checks,<br>you will be required to enter a valid credit card, which will be charged dollars for each individual on which you<br>are performing a background check.<br>Reason For Request: Employment                                                                                                         | Personal Information Rev                                               | iew                                                                                        |                    |                            |
| will be gathered. Each background check performed will cost dollars. After entering the background checks,<br>you will be required to enter a valid credit card, which will be charged dollars for each individual on which yo<br>are performing a background check.<br>Reason For Request: Employment                                                                                                                                                                                                                                                 |                                                                        | ation prior to clicking the "Proceed" but                                                  | ton. If you need i | to make changes, click the |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | will be gathered. Each backgroun<br>you will be required to enter a va | d check performed will cost <b>(1999)</b> doll<br>lid credit card, which will be charged . | ars. After enterin | g the background checks,   |
| Requester Name: First Last                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Reason                                                                 | For Request: Employment                                                                    |                    |                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Req                                                                    | uester Name: First Last                                                                    |                    |                            |
| Address: Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                        |                                                                                            |                    |                            |
| City, PA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                        |                                                                                            |                    |                            |
| 15963                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                        |                                                                                            |                    |                            |
| Country: US                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        | -                                                                                          |                    |                            |
| Email Addr:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        |                                                                                            |                    |                            |
| Phone Number: (814) 262-6400                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Ph                                                                     |                                                                                            |                    |                            |
| Fax Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        | Fax Number:                                                                                |                    |                            |
| < Back Cancel Proceed  Home   Record Check   Help   Privacy Policy   PA State Police Home Page                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                        |                                                                                            |                    |                            |

8. Complete the fields in the Record Check Form. Please enter as much information as possible. When finished, click "Enter This Request."

| Pennsy                                                                       | Ivania Access To C                                                                                                                                                    | criminal <b>H</b> isto                             | ory                |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------|
| Commissioner Tyree C. E                                                      | Blocker                                                                                                                                                               |                                                    | Gov. Thomas W Wolf |
| Home                                                                         | Record Check                                                                                                                                                          | <b>•</b>                                           | Help               |
| Record Check Request Forr                                                    | n                                                                                                                                                                     |                                                    |                    |
| First and middle names may <b>NOT</b> c<br>characters. Last names may contai | as possible for the individual you would<br>contain numbers, hyphens, apostropho<br>n dashes. Fields marked with an * are<br>nished entering requests, click the "Fir | es, dashes, or any other<br>required. To submit mu | non-alphabetic     |
| First Name:                                                                  |                                                                                                                                                                       | *                                                  |                    |
| Middle Name:                                                                 |                                                                                                                                                                       |                                                    |                    |
| Last Name:                                                                   |                                                                                                                                                                       | *                                                  |                    |
| Suffix:                                                                      |                                                                                                                                                                       |                                                    |                    |
| Identity Theft #:                                                            |                                                                                                                                                                       |                                                    |                    |
| Social Security #:                                                           | (x00000000) (H                                                                                                                                                        | ighly recommended)                                 |                    |
| Date of Birth:                                                               |                                                                                                                                                                       | (mm/dd/yyyy) *                                     |                    |
| Sex:                                                                         | Unknown 🔻                                                                                                                                                             |                                                    |                    |
| Race:                                                                        | Unknown <b>T</b>                                                                                                                                                      |                                                    |                    |
| First                                                                        | Aliases and/or Maiden Name<br>Middle                                                                                                                                  | Last/Maiden                                        |                    |
| Alias                                                                        |                                                                                                                                                                       |                                                    |                    |
| Alias                                                                        |                                                                                                                                                                       |                                                    | -                  |
| 2                                                                            |                                                                                                                                                                       |                                                    |                    |
| Alias                                                                        |                                                                                                                                                                       |                                                    |                    |
| Alias                                                                        |                                                                                                                                                                       |                                                    | -                  |
| 4                                                                            |                                                                                                                                                                       |                                                    |                    |
| Home   R                                                                     | Enter This Request Cancel                                                                                                                                             | ate Police Home Page                               |                    |

9. After entering the request, it will take you back to a blank record check request form. You will need to check "Finished" to proceed with the record check.

| Home                                                                      | Record Check                                                                                                                                                                                  | - Help                                                                  |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <b>Record Check Request For</b>                                           | m                                                                                                                                                                                             |                                                                         |
| First and middle names may <b>NOT</b><br>characters. Last names may conta | as possible for the individual you would like<br>contain numbers, hyphens, apostrophes, dai<br>in dashes. Fields marked with an * are requi<br>inished entering requests, click the "Finished | shes, or any other non-alphabetic<br>ired. To submit multiple requests, |
| First Name:                                                               |                                                                                                                                                                                               | *                                                                       |
| Middle Name:                                                              |                                                                                                                                                                                               |                                                                         |
| Last Name:                                                                |                                                                                                                                                                                               | *                                                                       |
| Suffix:                                                                   |                                                                                                                                                                                               |                                                                         |
| Identity Theft #:                                                         |                                                                                                                                                                                               |                                                                         |
| Social Security #:                                                        | (xxxxxxxxx) (Highly red                                                                                                                                                                       | commended)                                                              |
| Date of Birth:                                                            | / / (mm/                                                                                                                                                                                      | dd/yyyy) *                                                              |
| Sex:                                                                      | Unknown <b>T</b>                                                                                                                                                                              |                                                                         |
| Race:                                                                     | Unknown <b>T</b>                                                                                                                                                                              |                                                                         |
| Fir<br>Alias<br>1<br>Alias<br>2                                           | Aliases and/or Maiden Name<br>st Middle                                                                                                                                                       | Last/Maiden                                                             |
| Alias                                                                     |                                                                                                                                                                                               |                                                                         |
| Alias                                                                     |                                                                                                                                                                                               |                                                                         |
| 4                                                                         |                                                                                                                                                                                               |                                                                         |
|                                                                           | Enter This Request                                                                                                                                                                            |                                                                         |
|                                                                           | View Queued Record Check Requests(1)                                                                                                                                                          | )                                                                       |
|                                                                           | Finished Cancel                                                                                                                                                                               |                                                                         |

10. You will be asked to review the record check request information. If the information is correct, please click "Submit."

| Pennsy                                                                                                                                                                                    | Ivania <b>A</b> c                           | cess <b>T</b> o <b>C</b> rim      | inal <b>H</b> isto  | ory                            |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------|---------------------|--------------------------------|--|--|
| Commissioner, Pennsylv                                                                                                                                                                    | vania State Police                          |                                   |                     | ov. Thomas W Wolf              |  |  |
| Home                                                                                                                                                                                      |                                             | ord Check                         | -                   | Help 🚽                         |  |  |
| Record Check Request Rev                                                                                                                                                                  | iew                                         |                                   |                     |                                |  |  |
| Please review the following backgro<br>that request. To add more backgro<br>correct, click the "Submit" button t<br>The total charge for processing this<br>your credit card information. | und check requests,<br>o process your reque | click the "Add Request" L<br>est. | outton. Ónce all ti | he information is <sup>'</sup> |  |  |
|                                                                                                                                                                                           | Req                                         | uest Queue                        |                     |                                |  |  |
| Subject Name                                                                                                                                                                              | \$ SSN                                      | Date of Birth                     | 🗘 Race              | 🗘 Sex 🗘                        |  |  |
| Last,First Middle                                                                                                                                                                         | 123-45-6789                                 | 01/01/1985                        | w                   | F                              |  |  |
| One item found. 1                                                                                                                                                                         |                                             |                                   |                     |                                |  |  |
|                                                                                                                                                                                           | Payment met                                 | hod: Credit Card Only!            |                     |                                |  |  |
|                                                                                                                                                                                           | Add Request                                 | Cancel Submit                     |                     |                                |  |  |
|                                                                                                                                                                                           |                                             |                                   |                     |                                |  |  |
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- 11. Enter your credit card information. PATCH accepts Visa, Discover, Master Card and American Express.
- 12. Typically, results are returned immediately. You must print a copy and provide it to Human Resources. You may fax it to 814.269.9701 to the attention of Human Resources; or you may save it as a PDF and email it directly to <u>hr@pennhighlands.edu</u>.
- 13. If results are under review, then you must provide a copy of the Registration Receipt to Human Resources. Please be sure to keep a copy for your records as the Control Number and date of the request are needed to check on the status of your results.

Please note that Act 153 prohibits employers from accepting clearances that were obtained for a volunteer purpose.