

KPETS VOLUNTEER AFFIDAVIT

PLEASE INITIAL NEXT TO 1, 2, OR 3
AND FOLLOW THE CORRESPONDING DIRECTIONS

1. _____ I do not live in PA.

State of Residence: _____

_____ I understand that I must submit the following (dated no more than 5 years ago):

- PA State Police Criminal History Report,
- PA Department of Human Services Child Abuse Report, and
- Federal Criminal History Report. (FBI Fingerprinting)

Signature: _____ Date: _____

Printed Name: _____

2. _____ I currently live in PA, but I have not lived in PA for the entirety of the previous 10 years.

Date Moved to PA: _____

_____ I understand that I must submit the following (dated no more than 5 years ago):

- PA State Police Criminal History Report,
- PA Department of Human Services Child Abuse Report, and
- Federal Criminal History Report.* (FBI Fingerprinting)

Signature: _____ Date: _____

Printed Name: _____

*If you received a federal criminal history report since establishing residency in PA AND that report is not dated more than 5 years ago, you do not need to get another report. Please provide a copy of the report to KPETS AND complete the Verification on the following page.

3. _____ I have lived in PA for the entirety of the previous 10 years.

Date Moved to PA: _____

**Please complete the following Verification
by initialing next to each statement that is TRUE
and print, sign and date where indicated.**

(over)

VERIFICATION

I hereby attest that the statements appearing next to my initials are true and correct, and I understand that any false statements can and will be punishable by law:

_____ I have been a resident of PA for the entirety of the previous 10 years OR I have not been a resident of PA for the entirety of the previous 10 years, but I have received a federal criminal history report since establishing residency in PA AND that report is not dated more than 5 years ago.

_____ I understand that my position with KPETS is as a volunteer and is an unpaid position.

_____ I am not named in PA's statewide database as the perpetrator of a founded report of child abuse committed within the last 5 years.

_____ I have not been convicted of a felony offense under the Controlled Substance, Drug, Device and Cosmetic Act committed within the last 5 years.

_____ I am not disqualified from service as a volunteer as a result of a conviction of one or more of the following offenses listed under Title 18 of the PA Crimes Code (or equivalent crime under federal law or law of another state), or the attempt, solicitation, or conspiracy to commit any of these offenses:

- | | |
|--|--------------------|
| i. Criminal homicide | (Chapter 25) |
| ii. Aggravated assault | (Section 2702) |
| iii. Stalking | (Section 2709.1) |
| iv. Kidnapping | (Section 2901) |
| v. Unlawful restraint | (Section 2902) |
| vi. Rape | (Section 3121) |
| vii. Statutory sexual assault | (Section 3122.1) |
| viii. Involuntary deviate sexual intercourse | (Section 3123) |
| ix. Sexual assault | (Section 3124.1) |
| x. Aggravated indecent assault | (Section 3125) |
| xi. Indecent assault | (Section 3126) |
| xii. Indecent Exposure | (Section 3127) |
| xiii. Incest | (Section 4302) |
| xiv. Concealing death of a child | (Section 4303) |
| xv. Endangering Welfare of Children | (Section 4304) |
| xvi. Offenses relating to infant children | (Section 4305) |
| xvii. Felonies related to prostitution | (Section 5902 (b)) |
| xviii. Obscene materials/performances | (Section 5903(c)) |
| xix. Corruption of minors | (Section 6301) |
| xx. Sexual abuse of children | (Section 6312) |

_____ I have not been convicted of an offense similar in nature to those offenses listed above 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 and agree that I have the obligation to submit written notice to KPETS disclosing any future arrests or conviction for any of the criminal offenses outlined above and/or any notification that I have been listed as a perpetrator in a founded or indicated report of child abuse, within 72 hours of the occurrence of such arrest or conviction or notification of listing as a perpetrator.

_____ I understand that I must submit the following (dated no more than 5 years ago):

- PA State Police Criminal History Report, and
- PA Department of Human Services Child Abuse Report.

_____ I hereby affirm that the information in this Verification is true and correct to the best of my knowledge and belief and that the signature is being made subject to 18 Pa.C.S.A. § 4903(b), relating to crimes for false sworn statements which is a misdemeanor of the third degree punishable by up to one year imprisonment.

Signature: _____

Date: _____

Printed Name: _____