



East Pennsboro Youth Athletic League

P.O. Box 41
Enola, PA 17025

Sheaffer Fieldhouse & Athletic Complex
907 Wertzville Rd. Enola, PA 17025

An Approved 501(c)(3) Organization

Updated February 2026



Thank you for your willingness to volunteer with EPYAL. To protect our community, individuals having direct contact with children are required to obtain background checks and clearances, in compliance with state and federal laws and in accordance with Little League® rules. If you have completed these clearances for another organization, a copy of these forms must be provided to EPYAL prior to volunteering.

1. Act 34 – Criminal Record Check from the Pennsylvania State Police
 - *Must be completed within the past five (5) years.*
 - Free for volunteers.
 - <https://epatch.state.pa.us/>
2. Act 151 – Child Abuse History Clearances from the Department of Human Services
 - *Must be completed within the past five (5) years.*
 - Free for volunteers.
 - For the quickest turnaround, please apply online at <https://www.compass.state.pa.us/CWIS>
 - Paper forms can be obtained at <https://www.dhs.pa.gov/KeepKidsSafe/Clearances/Pages/PA-Child-Abuse-History-Clearance.aspx>
3. Act 114 – Disclosure Statement for Volunteers — *OR* — FBI Fingerprint Clearance
 - *Must be completed within the past five (5) years.*
 - Disclosure Statement (*found on pages 2-3 of this document*)
 - Eligible for PA-residents that have lived in PA for the last 10 years.
 - FBI Fingerprint Clearance
 - *Only required if you have NOT been a continuous resident of PA for the last 10 years.*
 - Cost: \$22.60 for volunteers, eligible for reimbursement upon proof of completion.
 - <https://www.dhs.pa.gov/KeepKidsSafe/Clearances/Pages/FBI-Fingerprinting.aspx>
 - When prompted for a Service Code, enter 1KG6XN
4. Little League Volunteer Requirements
 - NEW: You MUST sign up as a volunteer and complete all required information on Sports Connect registration website (allowing for electronic submission through Little League's JDP platform)
 - Must also approve JDP to run background check via email
 - Little League Abuse Course Completion Form (due every year)
 - <https://www.littleleague.org/university/articles/abuse-awareness-training-course/>
5. EPYAL Requirements
 - Coaching Application including Code of Conduct

All completed documents can be sent to baseball@epyal.com.

Thank you,

EPYAL Baseball Committee

Joseph Johns
EPYAL LL President

Kyle Trovinger
Baseball Director

Jason Clapper
Baseball Director

Abby Trovinger
Secretary

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 certification through the Federal Bureau of Investigation (FBI), 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 understand that if I have not been a resident of Pennsylvania during the entirety of the previous ten-year period, but have received certification from the FBI since establishing residency, I must provide a copy of the certification to my employer and am not required to obtain any additional FBI certifications.

I swear/affirm that, if providing certifications that have been obtained within the preceding 60 months, I have not been disqualified from service as outlined below or have not been convicted of an offense similar in nature to a crime listed below 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 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 2709.1	(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 swear/affirm that 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 certifications obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of certifications 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 certifications obtained for the volunteering purposes can only be used for that purpose and cannot be used for employment purposes.

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 certifications.

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: _____