



LEHIGH UNIVERSITY®

College of Education Clearance Checks

NOTE: This form must be signed and dated in order for your application to be considered complete.

This policy represents the minimum requirements for programs and students with respect to criminal and abuse records' checks. Individual programs and/or school districts can set more stringent requirements.

All students, who come into contact with children either through field-based or research experience in school settings in the U.S., must obtain and present, to their Program Coordinator, the following **up-to-date (not more than one year old)** clearance documents:

- **FBI Federal Criminal History Record (Act 114):** Obtain through Cogent Systems Fingerprint Services for PA found at: http://www.pa.cogentid.com/PDE_Main.html
- **Pennsylvania State Police Criminal Records Check (Act 34):** Request your record through the PATCH system found at: <https://epatch.state.pa.us/Home.jsp>
- **Pennsylvania Child Abuse History Clearance (Act 151):** Forms available at: <http://www.dpw.state.pa.us/partnersproviders/childwelfare/003671038.htm>
- **Mantoux Tuberculosis Screening or the results of a chest X-ray:** Forms available from the TLT Program Secretary (Iacocca A108). The TB test can be done at Lehigh's Health Center.

Please select the program that you're applying for from below, which is listed prior to the Program Coordinator.

- | | | | |
|---|------------------------|--------------|-----------------------|
| <input type="checkbox"/> Comparative and International Education: | Alex Wiseman | 610.758.5740 | incomint@lehigh.edu |
| <input type="checkbox"/> Counseling Psychology: | Nicholas Ladany | 610.758.3253 | incopsy@lehigh.edu |
| <input type="checkbox"/> Educational Leadership: | George White | 610.758.3227 | inedldr@lehigh.edu |
| <input type="checkbox"/> School Psychology: | Chris Cole | 610.758.3270 | inschpsy@lehigh.edu |
| <input type="checkbox"/> Special Education: | Lee Kern | 610.758.3267 | insped@lehigh.edu |
| <input type="checkbox"/> Teaching, Learning, and Technology: | MJ Bishop | 610.758.3235 | TLTProgram@lehigh.edu |

SIGN BELOW AND SUBMIT THIS FORM WITH YOUR APPLICATION

By signing below, I have read, understood and agree to abide by Lehigh University's College of Education policy on student clearance checks. I also understand that I must contact my Program Coordinator to determine when I need to supply my clearance documents to them.

Print Name

Date

Signature

Date