

Gateway School District
9000 Gateway Campus Boulevard
Monroeville, PA 15146 • 412-373-5713

Office Use Only	
_____	Form Complete
_____	Supporting Documentation Provided
_____	Qualifies for Reduced Reimbursement
_____	Qualifies for Full Reimbursement
APPROVED BY: _____	
AMOUNT:	\$ _____

VOLUNTEER CLEARANCE(S) REIMBURSEMENT FORM

In accordance with Board Policy No. 916 - Volunteers, the cost to procure the required clearances shall be the responsibility of the volunteer candidate, unless a financial hardship can be established by the candidate based upon the same criteria used to determine eligibility for free and reduced lunch status.

This form should be used by the volunteer candidate to apply for reimbursement for the costs of obtaining the required clearances. This form should be completed **AFTER** acquiring all of the clearances. Please complete this form, attach a copy of the clearances and submit it to the Personnel Office. Once received, the District will determine any reimbursable amount based upon the free and reduced status already on file at the District. Any reimbursable amount will be mailed to the address indicated below.

(Note: The District will only consider reimbursement for those volunteers that provide all supporting documentation and have "unmarked" clearances which allow them to work in our District.)

Type of Volunteer: Assistive _____ Independent _____ Coach/Sponsor _____

Location of Volunteer Duties: _____

Name _____
Last First Middle Initial

Address _____

City _____ State _____ Zip _____

Phone _____

Please indicate the type of clearance(s) you are requesting reimbursement:
(Attached copies of the actual clearances received)

Act 34 – Criminal History Record Cost \$10.00 _____

Act 151 -- Child Abuse History Clearance Cost \$10.00 _____

Act 114 – FBI Clearance Cost \$36.00 _____

I certify that the above information is accurate and that I have obtained all clearances in accordance with Board Policy.

Volunteer Signature