



Office of Teacher Preparation, Clinical Practice, and Certification

Clearance Checklist and Requirements for Education Majors

All Education majors are required to have the following seven clearances on file with the Office of Teacher Preparation, Clinical Practice, and Certification prior to entering any field placements.

Follow these steps to complete your clearances:

1. Obtain the following seven clearances:
 - Act 24, Act 34, Act 114, Act 126, Act 151
 - Professional Liability Insurance and TB Test (Please allow 3 days to receive results)
2. Save each clearance as a separate PDF file.
3. Name each file using this format:
 - Start with the clearance abbreviation (e.g., 24, 34, 114, etc.)
 - Then add your last name, a space, and your first name (*Example: 24 Jones Mary*)
4. Once all seven files are saved and named correctly, upload your documents to the [clearance database](https://clearances.commonwealthu.edu/)
 LINK: <https://clearances.commonwealthu.edu/>

Have questions?, Contact Beth McClure at bmcclure@commonwealthu.edu or at 570-662-4024.

Note: It is important that you keep copies for your records as clearances cannot be emailed, faxed, or mailed to you.

Clearance	Instructions	Cost
1. Act 24 (Arrest/ Convictions)	Form PDE 6004 Print, complete, sign , date, scan, and then upload.	Free
2. Act 34 (Criminal Record)	This report may be obtained at: https://epatch.pa.gov/home . Choose employment – do not choose “volunteer”. Please make sure the clearance you submit reads “has no criminal record” rather than “pending.”	\$22.00
3. Act 114 (FBI Federal Criminal History Record)	Go to: https://uenroll.identogo.com/ . Under the Service Code entry box, enter “ 1KG6RT ”. You will be directed to a page to schedule/manage an appointment and select fingerprinting locations. You will see “ 1KG6RT - Pennsylvania PDE-Colleges/Universities Teacher Education Program” at the top of this page. Select “Schedule or Manage Appointment” to register. Note that you must register prior to going to the fingerprinting location. At your appointment you will receive a receipt with a UZSV number . Keep this to allow our office to access your results. You will receive an email from pasafecheck that allows you a one-time opportunity to access and print your results.	\$25.25

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4. Act 126 (Mandated Reporter Training) - Good for 5 years	To complete this training, visit https://www.reportabusepa.pitt.edu . This is not for Act 48 Credit or Licensure.	Free
5. Act 151 (Child Abuse)	This form may be obtained at https://www.compass.state.pa.us/CWIS/Public/Home . On the home page, there is a box at the top. Click on "Create Individual Account" and then apply for your clearance. Please choose <i>School Employee Governed by Public School Code: Applying as a school employee who is required to obtain background checks pursuant to Section 111 of the Public School Code</i> . Please remember to log back in and print your results!	\$13.00
6. Professional Liability Insurance	<p>Purchase professional liability insurance. Three available sources for university students include but are not limited to:</p> <p>a) PSEA https://www.psea.org/about-psea/how-to-join/student-registration/</p> <p>b) Council for Exceptional Children (CEC) https://exceptionalchildren.org/membership/student-membership/pre-service-student-membership or</p> <p>c) alternative personal.</p> <p>You are able to choose your coverage periods from 1-4 years. It is acceptable to submit a copy of just the front of your membership card.</p> <p>Deaf & Hard of Hearing Majors should purchase PSEA membership. For our ASL/English Interpreting Majors: the following two options are available: Interpreters for the Deaf Professional Liability Insurance (proliability.com) or Welcome To DHH Insurance.</p> <p>Please ensure that the policy you select includes a minimum of \$1,000,000.00 per claim and \$3,000,000.00 aggregate.</p>	<p>PSEA</p> <p>\$30-\$90 Dependin g on Coverage</p>
7. Tuberculosis Test	Submit the results from a current tuberculosis screening administered within the past 90 days, unless otherwise required by individual districts. Your submission should include your name, the doctor's office information, the date the serum was given, the date the result was read, the result positive/negative, and a signature from the doctor's office.	Based on doctor's office fee