

KEYSTONE SCHOOL DISTRICT

Application Process for **PAID** Coach

- ☐ **Letter of Interest from Applicant** - Addressed to Mrs. McNaughton, High School Principal
- ☐ **Letter of Support from Head Varsity Coach** - Addressed to Mrs. McNaughton, High School Principal
- ☐ **Keystone School District Application** - Fill out completely and sign
- ☐ **Commonwealth of Pennsylvania Sexual Misconduct/Abuse Disclosure Release (Act 168)** - Fill the attached form out and return with all other documents. Keystone School District will submit to all applicable employers. No cost.
- ☐ **Act 24: Arrest/Conviction Report and Certification Form** - No cost; Fill out and sign

Please note: Clearances can not be any older than one year from the date of application. You also should not use anyone at the school's email for a contact email - you should only use yours. When you receive your clearances via email, you can then forward them to aporter@keyknox.com.

- ☐ **Federal Criminal History Record - Act 114**

You must register prior to going to the fingerprint site; walk-in service is allowed, but all applicants are required to complete pre-enrollment in the new universal enrollment system. Pre-enrollment can be completed online or over the phone. The registration website is available online 24 hours/day, seven days a week at <https://uenroll.identogo.com> Telephone registration is available at 1-844-321-2101 Monday through Friday, 8am to 6pm EST. During the pre-enrollment process, all demographic data for the applicant is collected along with notices about identification requirements and other important information.

- When applying online, when prompted for a Service Code, enter **1KG6XN** (School District)
- On the next screen, click "Schedule or Manage Appointment"
- Fill out all the required information. As you fill out the required information, you will be asked to search for a place to have your fingerprints captured - the Intermediate Unit in Clarion is the closest. You will also receive a registration ID (which starts with UEP) which you will need to take with you
- \$25.25(+/-) Fee to be paid at the time of your actual fingerprints at Riverview Intermediate Unit, 270 Mayfield Road, Clarion, PA 16214. Their phone number is 814-226-7103.
- Attach the PAE confirmation number & the proof of being fingerprinted from the IU

- ☐ **Act 34: State Police Criminal History Record** - <https://epatch.pa.gov>

- \$22.00 (+/-) fee
- In completing the PA State Police clearance, the "reason" is **Employment**

- ☐ **Act 151: Child Abuse History Record** - www.compass.state.pa.us/cwis

- \$13 (+/-) fee
- Once at this site you create an individual account, under the application purpose, check the box titled, "**School Employee Governed by Public School Code**"

- ☐ **Mandated and Permissive Reporter in Pennsylvania Training** - The Child Protective Services Law requires that all individuals who have direct contact with children (through the course of their employment with a PA school district) are required to complete Mandated Reporter training. This free, online course provides information on the recognition of child maltreatment, the obligation to report child maltreatment and the procedures for making a report when you suspect child abuse/maltreatment. This training is necessary for all Pennsylvania school employees who wish to maintain their certifications and/or employment within the public school system. Once complete, the training remains current for a period of 5 years. Pay careful attention to the information presented in the training as some behaviors that are often characterized as "disrespectful" or "insubordinate" can be associated with indicators of child abuse. This training can be completed in one session or many sessions. How to access the 3 hour online training: Go to www.reportabusepa.pitt.edu; If you have not previously registered with this site, please click the

Registration link at the top of the page; Enter your username and password to access the training; Upon successful completion of the course, you will print a Certificate of Completion and submit it with your application

- ☐ **Concussion and Cardiac Certifications** - A coach must complete a course under each heading, **ANNUALLY**, prior to holding practice with their students. Directions can also be found under forms on the Athletics link of www.keyknox.com.

- **Concussion Training course (must complete one of the two courses)**

NFHS Concussion in Sports (<http://nfhslearn.com/courses/38000>)

Concussion Wise (<https://sportsafety.com/coach/concussionwise/>)

- **Sudden Cardiac Arrest Training Course**

Cardiac Wise (<https://sportsafety.com/coach/cardiacwise/>)

Do not pay for any certificates. Screenshot or send email of completion to aporter@keyknox.com

- ☐ **Create a Coaching Profile on PIAA** - Visit www.piaa.org; Click "Login" (the gold box in top right corner of your screen). Click the "Coaches" tab. Click "Register" and follow the steps to create a new user. Once you have created a profile, the Coaching Education System becomes available.

- In the first section, "PIAA Education Requirements", upload certificates of completion or a transcript to support completion of the required coaching and first aid courses in PDF form and uploaded separately. *
- In the second section, select each school which you are affiliated. Simply begin typing the school name, and the system will match all available schools.
- In the third section "Optional School Education", you can submit concussion and cardiac coursework here.

****See below for this information***

- ☐ **Coaching Requirements for PIAA** - All paid or volunteer coaches that are currently employed or previously engaged by a PIAA member school must complete two courses as provided ASAP. First time coaches hired or approved at any time after July 1, 2016, will have two years from the date of hire/approval to complete this requirement. If you have ever coached before, even if it was 10 years ago, or 2 years ago, you **MUST** complete the requirements before turning in all of your paperwork. If you have **NEVER** coached before, you are exempt from these requirements for 2 years from the date of approval by Keystone School Board of Directors.

NFHS (access info at www.nfhslearn.com) - Fundamentals of Coaching (\$50) and First Aid, Health and Safety (\$45)

Additional accepted coursework: 1. PIAA will accept American Red Cross and American Heart Association First Aid training for the first aid requirement. Upload a copy of your card to your coach profile in PIAA; 2. PIAA will accept college level courses for either the coaching and/or first aid requirements. A coach must upload their transcript or certificate to PIAA.

- ☐ **Keystone School District Suicide Awareness, Prevention and Response Protocol Memo - Keep for your Records**

When you have **ALL** documents in hand, please **submit everything at one time** to the High School - Attention: Andrea Porter. Even though the directions tell you to address everything to Mrs. McNaughton, **PLEASE SUBMIT YOUR DOCUMENTS TO ANDREA PORTER - via aporter@keyknox.com** Please submit only COPIES of your clearances. You are NOT permitted to attend any functions (open gyms, practices...etc.) until approved by the School Board.

KEYSTONE SCHOOL DISTRICT

451 Huston Avenue
Knox, PA 16232
(814) 797-5921 (District Office)
(814) 797-1261 (High School)
(814) 797-1251 (Elementary School)

POSITION(S) APPLYING FOR:

♦ PERSONAL INFORMATION:

Name _____

Address _____

Home/Cell Phone _____ Email _____

♦ EDUCATION:

♦ WORK EXPERIENCE:

- Are you currently employed? ___ Yes ___ No ► May we contact your present employer? ___ Yes ___ No
► Do you have current clearances? ___ Yes ___ No ► What date would be available to begin duties? _____

♦ THREE (3) REFERENCES WITH PHONE NUMBERS:

1. _____
2. _____
3. _____

♦ ADDITIONAL INFORMATION/RELATED EXPERIENCE:

♦ SIGNATURE/DATE

COMMONWEALTH OF PENNSYLVANIA
SEXUAL MISCONDUCT/ABUSE DISCLOSURE RELEASE
(Pursuant to Act 168 of 2014)

Instructions

This standardized form has been developed by the Pennsylvania Department of Education, pursuant to Act 168 of 2014, to be used by school entities and independent contractors of school entities and by applicants who would be employed by or in a school entity in a position involving direct contact with children to satisfy the Act's requirement of providing information related to abuse or sexual misconduct. As required by Act 168, in addition to fulfilling the requirements under section 111 of the School Code and the Child Protective Services Law ("CPSL"), an applicant who would be employed by or in a school entity in a position having direct contact with children, must provide the information requested in SECTION 1 of this form and complete a written authorization that consents to and authorizes the disclosure by the applicant's current and former employers of the information requested in SECTION 2 of this form. The applicant shall complete one form for the applicant's current employer(s) and one for each of the applicant's former employers that were school entities or where the applicant was employed in a position having direct contact with children (therefore, the applicant may have to complete more than one form). Upon completion by the applicant, the hiring school entity or independent contractor shall submit the form to the applicant's current and former employers to complete SECTION 2. **A school entity or independent contractor may not hire an applicant who does not provide the required information for a position involving direct contact with children.**

Relevant Definitions:

Direct Contact with Children is defined as: "the possibility of care, supervision, guidance or control of children or routine interaction with children."

Sexual Misconduct is defined as: "any act, including, but not limited to, any verbal, nonverbal, written or electronic communication or physical activity, directed toward or with a child or a student regardless of the age of the child or student that is designated to establish a romantic or sexual relationship with the child or student. Such acts include, but are not limited to: (1) sexual or romantic invitation; (2) dating or soliciting dates; (3) engaging in sexualized or romantic dialogue; (4) making sexually suggestive comments; (5) self-disclosure or physical exposure of a sexual, romantic or erotic nature; or (6) any sexual, indecent, romantic or erotic contact with the child or student."

Abuse is defined as "conduct that falls under the purview and reporting requirements of the CPSL, 23 Pa.C.S. Ch. 63, is directed toward or against a child or a student, regardless of the age of the child or student."

Please Note

A prospective employer that receives any requested information regarding an applicant may use the information for the purpose of evaluating the applicant's fitness to be hired or for continued employment and shall report the information as appropriate to the Department of Education, a state licensing agency, law enforcement agency, child protective services agency, another school entity or to a prospective employer.

If the prospective employer decides to further consider an applicant after receiving an affirmative response to any of the questions listed in SECTIONS 1 and 2 of this form, the prospective employer shall request that former employers responding affirmatively to the questions provide additional information about the matters disclosed and include any related records. The **Commonwealth of Pennsylvania Sexual Misconduct/Abuse Disclosure Information Request** can be used to request this follow-up information. Former employers shall provide the additional information and records within 60 calendar days of the prospective employer's request.

The completed form and any information or records received shall not be considered public records for the purposes of the Act of February 14, 2008 (P.L. 6, No. 3) known as the "Right to Know Law."

The Department of Education shall have jurisdiction to determine willful violations of Act 168 and may, following a hearing, assess a civil penalty not to exceed \$10,000. School entities shall be barred from entering into a contract with an independent contractor who is found to have willfully violated the provisions of Act 168.

**COMMONWEALTH OF PENNSYLVANIA
SEXUAL MISCONDUCT/ABUSE DISCLOSURE RELEASE
(under Act 168 of 2014)**

(Hiring school entity or independent contractor submits this form to ALL current employer(s) and to former employer(s) that were school entities and/or where the applicant had direct contact with children)

To:	Name of Current or Former Employer:	<input type="checkbox"/> No applicable employment
	Street Address:	
	City, State, Zip:	
	Telephone Number:	Fax Number: Email:
	Contact Person:	Title:

The named applicant is under consideration for a position with our entity. The Pennsylvania General Assembly has determined that additional safeguards are necessary in the hiring of school employees to ensure the safety of the Commonwealth's students. The individual whose name appears below has reported previous employment with your entity. We request you provide the information requested in SECTION 2 of this form within **20 calendar days** as required by Act 168 of 2014.

SECTION 1: APPLICANT CERTIFICATION AND RELEASE (TO BE COMPLETED BY THE APPLICANT EVEN IF THE APPLICANT HAS NO CURRENT OR PRIOR EMPLOYMENT TO DISCLOSE)

Applicant's Name (First, Middle, Last):	
Any former names by which the Applicant has been identified:	
DOB:	
Last 4 digits of Applicant's Social Security Number:	PPID (if applicable):
Approximate dates of employment with the entity listed above:	
Position(s) held with the entity:	

Pursuant to Act 168, an employer, school entity, administrator, and/or independent contractor that provides information or records about a current or former employee or applicant shall be immune from criminal liability under the CPSL, the Educator Discipline Act, and from civil liability for the disclosure of the information, unless the information or records provided were knowingly false. Such immunity shall be in addition to and not in limitation of any other immunity provided by law or any absolute or conditional privileges applicable to such disclosure by the virtue of the circumstances of the applicant's consent thereto. Under Act 168, the willful failure to respond to or provide the information and records as requested may result in civil penalties and/or professional discipline, where applicable.

Have you (Applicant) ever:

- Yes ☐ No ☐ Been the subject of an abuse or sexual misconduct investigation by any employer, state licensing agency, law enforcement agency or child protective services agency (unless the investigation resulted in a finding that the allegations were false)?
- Yes ☐ No ☐ Been disciplined, discharged, non-renewed, asked to resign from employment, resigned from or otherwise separated from employment while allegations of abuse or sexual misconduct were pending or under investigation or due to adjudication or findings of abuse or sexual misconduct?
- Yes ☐ No ☐ Had a license, professional license or certificate suspended, surrendered or revoked while allegations of abuse or sexual misconduct were pending or under investigation or due to an adjudication or findings of abuse or sexual misconduct?

By signing this form, I certify under penalty of law that the statements made in this form are correct, complete, and true to the best of my knowledge. I understand that false statements herein, including, without limitation, any willful failure to disclose the information required, shall subject me to criminal prosecution under 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and to discipline up to, and including, termination or denial of employment, and may subject me to civil penalties and disciplinary action under the Educator Discipline Act. I also hereby authorize the above-named employer to release to the entity listed on page 3, the information requested in SECTION 2 of this form and any related records. I hereby release, waive, and discharge the above-named employer from any and all liability of any kind that may arise from such disclosure or release of records. I understand that third party vendors may be used to process this Act 168 pre-employment history review.

Signature of Applicant

Date

SECTION 2: CURRENT/FORMER EMPLOYER VERIFICATION (TO BE COMPLETED BY THE APPLICANT'S CURRENT EMPLOYER(S) AND ALL FORMER EMPLOYERS THAT WERE SCHOOL ENTITIES AND/OR WHERE THE APPLICANT HAD DIRECT CONTACT WITH CHILDREN)

Dates of employment of Applicant: _____

Contact telephone #: _____

To the best of your knowledge, has Applicant ever:

- Yes ☐ No ☐ Been the subject of an abuse or sexual misconduct investigation by any employer, state licensing agency, law enforcement agency or child protective services agency (unless the investigation resulted in a finding that the allegations were false)?
- Yes ☐ No ☐ Been disciplined, discharged, non-renewed, asked to resign from employment, resigned from or otherwise separated from employment while allegations of abuse or sexual misconduct were pending or under investigation or due to adjudication or findings of abuse or sexual misconduct?
- Yes ☐ No ☐ Had a license, professional license or certificate suspended, surrendered or revoked while allegations of abuse or sexual misconduct were pending or under investigation or due to an adjudication or findings of abuse or sexual misconduct?
- ☐ No records or other evidence currently exists regarding the above questions. I have no knowledge of information pertaining to the applicant that would disqualify the applicant from employment.

Former Employer Representative Signature and Title

Date

Return all completed information to:

School Entity/Independent Contractor:			
Address:		Phone:	
City:	State:	Zip:	Fax: Email:
Contact Person:		Title:	

Date Form Received: _____

Received by: _____

ARREST/CONVICTION REPORT AND CERTIFICATION FORM
(under Act 24 of 2011 and Act 82 of 2012)

Section 1. Personal Information

Full Legal Name: _____

Date of Birth: ____/____/____

Other names by
which you have
been identified: _____

Section 2. Arrest or Conviction

☐

By checking this box, I state that I have NOT been arrested for or convicted of any Reportable Offense.

☐

By checking this box, I report that I have been arrested for or convicted of an offense or offenses enumerated under 24 P.S. §§1-111(e) or (f.1) ("Reportable Offense(s)"). See Page 3 of this Form for a list of Reportable Offenses.

Details of Arrests or Convictions

For each arrest for or conviction of any Reportable Offense, specify in the space below (or on additional attachments if necessary) the offense for which you have been arrested or convicted, the date and location of arrest and/or conviction, docket number, and the applicable court.

Section 3. Child Abuse

☐

By checking this box, I state 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.

☐

By checking this box, I report that I have 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.

Section 4. Certification

By signing this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a Reportable Offense, shall subject me to criminal prosecution under 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Signature

Date

INSTRUCTIONS

Pursuant to 24 P.S. §1-111(c.4) and (j), the Pennsylvania Department of Education developed this standardized form (PDE-6004) to be used by current and prospective employees of public and private schools, intermediate units, and area vocational-technical schools.

As required by subsection (c.4) and (j)(2) of 24 P.S. §1-111, this form shall be completed and submitted by all current and prospective employees of said institutions to provide written reporting of any arrest or conviction for an offense enumerated under 24 P.S. §§1-111(e) and (f.1) and to provide notification of having 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.

As required by subsection (j)(4) of 24 P.S. §1-111, this form also shall be utilized by current and prospective employees to provide written notice within seventy-two (72) hours after a subsequent arrest or conviction for an offense enumerated under 24 P.S. §§1-111(e) or (f.1).

In accordance with 24 P.S. §1-111, employees completing this form are required to submit the form to the administrator or other person responsible for employment decisions in a school entity. Please contact a supervisor or the school entity administration office with any questions regarding the PDE 6004, including to whom the form should be sent.

PROVIDE ALL INFORMATION REQUIRED BY THIS FORM LEGIBLY IN INK.

LIST OF REPORTABLE OFFENSES

- **A reportable offense enumerated under 24 P.S. §1-111(e) consists of any of the following:**

- (1) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

<ul style="list-style-type: none"> ▪ 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 2910 (relating to luring a child into a motor vehicle or structure) ▪ 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 3124.2 (relating to institutional sexual assault) ▪ Section 3125 (relating to aggravated indecent assault) ▪ Section 3126 (relating to indecent assault) ▪ Section 3127 (relating to indecent exposure) ▪ Section 3129 (relating to sexual intercourse with animal) ▪ Section 4302 (relating to incest) ▪ Section 4303 (relating to concealing death of child) 	<ul style="list-style-type: none"> ▪ Section 4304 (relating to endangering welfare of children) ▪ Section 4305 (relating to dealing in infant children) ▪ A felony offense under section 5902(b) (relating to prostitution and related offenses) ▪ Section 5903(c) or (d) (relating to obscene and other sexual materials and performances) ▪ Section 6301(a)(1) (relating to corruption of minors) ▪ Section 6312 (relating to sexual abuse of children) ▪ Section 6318 (relating to unlawful contact with minor) ▪ Section 6319 (relating to solicitation of minors to traffic drugs) ▪ Section 6320 (relating to sexual exploitation of children)
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- (2) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."
- (3) An offense SIMILAR IN NATURE to those crimes listed above in clauses (1) and (2) under the laws or former laws of:
 - the United States; or
 - one of its territories or possessions; or
 - another state; or
 - the District of Columbia; or
 - the Commonwealth of Puerto Rico; or
 - a foreign nation; or
 - under a former law of this Commonwealth.

- **A reportable offense enumerated under 24 P.S. §1-111(f.1) consists of any of the following:**

- (1) An offense graded as a felony offense of the first, second or third degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (10) ten years has elapsed from the date of expiration of the sentence for the offense.
- (2) An offense graded as a misdemeanor of the first degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (5) five years has elapsed from the date of expiration of the sentence for the offense.
- (3) An offense under 75 Pa.C.S. § 3802(a), (b), (c) or (d) (relating to driving under influence of alcohol or controlled substance) graded as a misdemeanor of the first degree under 75 Pa.C.S. § 3803 (relating to grading), if the person has been previously convicted of such an offense and less than (3) three years has elapsed from the date of expiration of the sentence for the most recent offense.

DIRECTIONS FOR CREATING A COACH PROFILE AND UPLOADING COURSE REQUIREMENTS TO THE PIAA WEBSITE

Wednesday, January 24, 2018

To use the coaching credentialing system - visit our website: www.piaa.org;

Click "Login" (the gold box in top right corner of your screen).

NOTE: School, official, or other logins are not useable for the purpose of coaching education.

If the box says "Account ", you are already logged in to our system, as either an official or as school staff. Please make sure to logout prior to creating a coaches profile. Please do not create more than one Coaches Profile. Use the "Did you forget your password?" tool or call for assistance.

Click "Coaches" from the Account Type drop down menu.

If you have not previously created a profile, make sure User Name and Password are blank, click "Register To Be A Coach" and fill in your personal and account information. Click "Register". You will arrive at the Coaching Education System page.

- In the top section, "PIAA Education Requirements", click "Add PIAA Documentation" to upload PDF files to support completion of the required coaching and first aid required courses (this is a one time requirement). Select your NFHS, ASEP or SafeSchools, approved course title from within the Course Name field. If submitting a college transcript, type in the name of the course you are submitting and the Course Number. Enter the date issued. Do not upload any other documents here (use the bottom section).

NOTE: If submitting a single transcript for both requirements, it must be uploaded twice separately, once for Coaching and again for First Aid.

- In the middle section, "School Affiliations", click "Add School". Simply begin typing the school name in the top field, and the system will match all available schools. Click on the school name and select the sport(s) you coach. Click "Add School" to complete the process for a single school. Multiple schools may be added if affiliated with more than one school. Please keep this section updated so that the appropriate Athletic Directors can view your documents.
- In the bottom section, "Optional School Education", click "Add Education Documentation" to upload the annual PDE requirements for Cardiac and Concussion, or any other document a school may require coaches to upload, at their discretion. Please check with your athletic administrator to see if you are required to submit any items in this location.

If you have any questions or concerns, please contact Jennifer Grassel, PIAA Assistant Executive Director in the PIAA Office at (717) 697-0374, or (800) 382-1392.

KEYSTONE SCHOOL DISTRICT
Suicide Awareness, Prevention and Response Protocol

Established using School Board Policy No. 819

Last Rev. February 2018

Authority

In compliance with state law and regulations, and in support of the district's suicide prevention measures, information received in confidence from a student must be revealed to the student's parents/guardians, the building principal or other appropriate authority when the health, welfare or safety of the student or any other person is deemed to be at risk.

This protocol shall apply in any situation where a student is expressing suicidal thoughts or intentions of self-harm on school property, at any school-sponsored activity, or any public vehicle providing transportation to or from a school-sponsored activity. This protocol shall also apply following a student's suicide threat or attempt that does not occur on school grounds or during a school-sponsored activity, but that is reported to any school personnel.

Procedures for Students at Risk During School Hours

1. School personnel (i.e. teacher) made aware of suicidal thoughts or intentions of self-harm immediately contact school guidance counselor and/or school administrator.
2. School personnel will interview/assess student to ensure safety and make them aware of their concerns.
3. Parent/guardian of student identified as being at risk of suicide must be immediately notified by the school personnel and involved in consequent actions, unless situation dictates that call to CRISIS/9-1-1 is made straightaway.
4. *If the parent or guardian refuses to cooperate, cannot be reached or there is any doubt regarding the child's safety,* school personnel will call Clarion County CRISIS and/or Clarion County CYS and request support from an intake coordinator/delegate.
5. If any mandated reporter suspects that a student's risk status is the result of abuse or neglect, that individual must comply with the reporting requirements of the Child Protective Services Law and contact CYS/ChildLine.
6. School personnel initiate SAP/ESAP Referral as soon as practically possible.

Procedures for Students at Risk After School Hours

1. School personnel (i.e. coach) made aware of suicidal thoughts or intentions of self-harm immediately interview student (if possible) to ensure safety and make them aware of your concerns.
2. Parent/guardian of student identified as being at risk of suicide must be immediately notified by the school personnel and involved in consequent actions.
3. *If the parent or guardian cannot be reached,* call Clarion County CRISIS or 9-1-1 and request support from an intake coordinator/delegate.
4. If any mandated reporter suspects that a student's risk status is the result of abuse or neglect, that individual must comply with the reporting requirements of the Child Protective Services Law and contact CYS/Child Line.
5. School personnel inform the school administrator (Principal, Athletic Director) of incident as soon as practically possible.
6. Principal/counselor initiates SAP/ESAP Referral as soon as practically possible.

Risk Factors

Risk Factors refer to personal or environmental characteristics that are associated with suicide including, but not limited to:

- Behavioral Health Issues/Disorders:
 - Depression.
 - Substance abuse or dependence.
 - Previous suicide attempts.
 - Self-injury.

Risk Factors Continued

- Personal Characteristics:
 - Hopelessness, low self-esteem
 - Loneliness, social alienation, isolation, lack of belonging.
 - Poor problem-solving or coping skills.
 - Impulsivity, risk-taking, recklessness.
- Adverse/Stressful Life Circumstances:
 - Interpersonal difficulties or losses.
 - Disciplinary or legal problems.
 - Bullying (victim or perpetrator).
 - School or work issues.
 - Physical, sexual or psychological abuse.
 - Exposure to peer suicide.
- Family Characteristics:
 - Family history of suicide or suicide behavior.
 - Family mental health problems.
 - Divorce, death of parent/guardian.
 - Parental-child relationship.

Warning Signs

Warning signs are indications that someone may be in danger of suicide, either immediately or in the near future. Warning signs include, but are not limited to:

- Expressions such as hopelessness, rage, anger, seeking revenge, feeling trapped, anxiety, agitation, no reason to live or sense of purpose.
- Recklessness or risky behavior.
- Increased alcohol or drug use.
- Withdrawal from friends, family or society.
- Dramatic mood changes.

Important Contact Numbers

Clarion County CRISIS: 814-226-7223

Clarion County CYS: 814-226-5150

ChildLine and Abuse Registry: 1-800-932-0313

National Suicide Prevention Lifeline: 1-800-273-8255