

Wilmington Area School District

300 Wood Street
New Wilmington, PA 16142
(724) 656-8866 x 6000
www.wasd.school

College Student Clearance Registration

In accordance with School Board Policy No. 307 "Student Teachers/Interns", the following information will be secured from all student teacher/interns, etc.:

Check appropriate box: ☐ Student Teacher ☐ Intern ☐ Observation ☐ Field Experience
☐ Other _____

Last Name: _____ First Name: _____ Middle: _____

Date of Birth (mm/dd/yyyy): _____ Phone: (H) _____ (C) _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

College/University: _____ Subject Area: _____

School Year: _____ Semester: ☐ Fall ☐ Spring

Bldg: ☐ New Wilm. Elem. ☐ MS ☐ HS Co-operating Teacher(s): _____

Student Signature: _____ Date: _____

Please submit original clearances and we will make copies for our records.

DISTRICT USE ONLY

The District has received and reviewed the following:

_____ Clearance Registration Form	_____ FBI Record / FBI Fingerprints
_____ Act 34 State Police Criminal History	_____ Act 151 PA Child Abuse History Clearance
_____ Act 24 Arrest/Conviction Form	_____ TB Test and Results _____
_____ Other _____	

The above Student Teacher/Intern has been (check one) ☐ Approved ☐ Denied

Signature: _____ Date: _____

Printed Name: _____ Tressa McBride Title: _____ Administrative Assistant