



**JUNIOR COUNSELOR CERTIFICATION OF RESIDENCY AND CLEAR RECORD
IN LIEU OF PROVIDING FEDERAL CRIMINAL HISTORY RECORD**

Junior counselor name: _____

I certify that the individual named above is between 14 and 17 years old.

I further certify that the individual named above has been a Pennsylvania resident during the entirety of the last 10 years.

I further certify that the individual named above has not been disqualified from working and has not been convicted of any offense identical or similar to any of the following:

- Criminal homicide
- Aggravated assault
- Stalking
- Kidnapping
- Unlawful restraint
- Rape
- Statutory sexual assault
- Involuntary deviate sexual intercourse
- Sexual assault
- Aggravated indecent assault
- Indecent assault
- Indecent exposure
- Incest
- Concealing death of a child
- Endangering welfare of children
- Dealing in infant children
- Felony offense relating to prostitution and related offenses
- Offense relating to obscene and other sexual materials and performances
- Offense relating to corruption of minors
- Sexual abuse of children
- Offense relating to attempt, solicitation or conspiracy to commit any of the offenses in this certification
- Felony offense relating to The Controlled Substance, Drug, Device and Cosmetic Act.

Junior counselor signature

Date:

Parent signature

Parent name:

Date: