



## **Volunteer Information Sheet for Parents and Guardians**

- A volunteer is an adult who is left alone to supervise students. Volunteers may include tutors or chaperones on a school trip.
- A visitor is an adult who comes into the school or a classroom, but is always in the presence of a Teacher or Administrator.
- Volunteers are required by State of Delaware code to have a criminal background check (CBC).
- Volunteers who are already on the Lake Forest Volunteer list do not need to get a *new* criminal background Check or complete a new packet.
- NEW volunteers should obtain a Volunteer Packet from their child's school. The school will submit the completed packet to the Office of Human Resources. Once all clearances and paperwork are received, the volunteer will be added to the Lake Forest Volunteer list.
- Volunteers currently employed by other State of Delaware agencies may request that their agency send to Lake Forest Human Resources a "true copy" of their Criminal Background check that is signed and dated by their agency official.
- The School Administrator will determine if you need a Volunteer Packet or if you are considered a visitor to the school.

**Thank you for helping our students by serving as a visitor or volunteer!**



## **Volunteer Packet**

- Policy and guidelines for becoming a volunteer are found in Delaware Code Title 31 §309 and Board Policy IJOC- School Volunteers.
- Required for any circumstances where the volunteer will be outside the sight of a teacher or administrator. This includes, but is not limited to, mentoring students and all field trips.
- State of Delaware and FBI Criminal Background Check Required
- \$18 fee (to be paid by individual to the State of Bureau of Identification.) Note: If an individual is currently employed by a State of Delaware Agency, they may request the agency send us (via state mail) a “True Copy” of the CBC that is signed and dated by the Agency official. Current Employees of the Lake Forest School District will not require a CBC, or any packet.

**To obtain a State of Delaware and FBI Criminal Background Check, please go to:**

**BLUE HEN CORPORATE CENTER AND MALL  
SUITE 1B**

**655 BAY ROAD (US 113)**

**HOURS:**

**Monday, 8:30AM – 6:30 PM**

**Tuesday through Friday, 8:30AM – 3:30PM**

**Cash, money order, Visa, MasterCard and Discover accepted**

**Personal checks are NOT accepted**

## SCHOOL VOLUNTEER ENROLLMENT FORM



### Volunteer Conduct

The Lake Forest School District Board of Education believes that one of the best methods of serving in a position of a School Volunteer or Chaperone is that of setting a good example. The Board expects that all school volunteers and chaperones will strive to set the kind of example for students that will serve them well in their own conduct and behavior which will contribute toward an appropriate school atmosphere. To that end, in dress, conduct, and interpersonal relationships, all volunteers and chaperones should recognize that they are being continually observed by students and that their actions and demeanor will be reflected in the conduct of students. The personal life of a volunteer or chaperone will not be the concern of the District unless it prevents the individual from effectively and positively performing assigned functions during work hours, or if some aspect of it violates any local, state, or federal laws. No volunteer or chaperone will commit or attempt to induce students or others to commit an act or acts of immoral, unethical, or illegal conduct, which may be harmful to others or bring discredit to the District. Immoral, unethical, or illegal conduct while performing the duties of volunteer or chaperone will constitute grounds for termination of the status as a volunteer or chaperone.

I have read and understand the above expectations.

---

\*Signature

Date

---

Print Name

School

\*Signature required before volunteer may work with students.



## **Volunteer Disclosure Form**

It is the policy of the Lake Forest School District to make every reasonable effort to provide a safe learning environment for students working with volunteers. Subsequently, the District requires the following confidential information from volunteers who directly work with students.

This form must be completed and returned to the Office of Human Resources prior to beginning a volunteer experience in the Lake Forest School District.

1. Have you ever been convicted of a crime other than a minor traffic violation? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

2. Have you ever been convicted, or had an administrative finding, of violating any law involving child abuse, sexual abuse, sexual harassment or exploitation, or any other crime related to children? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

3. Are you required to register as a sex offender with the Sex Offender Registry? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

4. Do you currently have charges pending or are there any ongoing investigations relating to any of the aforementioned? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

I, as a volunteer in the Lake Forest School District, fully understand that this position is, as stated, on a volunteer basis, which inherent in its meaning, entitles me to no pay or any form of compensation for my services. I understand that the volunteer agreement can be terminated without notice at any time by either the District or the volunteer.

I understand that any misrepresentation on any of the volunteer enrollment form may result in immediate disqualification from any other volunteer service within the District. I understand that the Lake Forest School District reserves the right to deny my application to serve as a volunteer. I hereby release the District, its Board and its agents, as well as all providers of information, from any liability related to furnishing and receiving information related to this process.

\_\_\_\_\_  
\*Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\*Signature required before volunteer may work with students





## DELAWARE CHILD PROTECTION REGISTRY REQUEST FORM



Fax or Mail Request to:

OCCL, Criminal History Unit  
Concord Plaza, Hagley Building  
3411 Silverside Road  
Wilmington, DE 19810

Phone: 302-892-5800 Fax: 302-633-5191

When requesting Child Protection Registry checks:

- **Allow 15 working days for results to be processed**
- **Do not use a cover sheet**
- **Do not send duplicate requests**
- **Form must be submitted to DSCYF within 90 days of signature date in order to be processed**

### PART I. APPLICANT INFORMATION (*PLEASE PRINT CLEARLY*)

Name: \_\_\_\_\_  
Last First Middle

Other Name(s) used: \_\_\_\_\_ DE Drivers License # \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_  
mm / dd / yyyy

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Are you on the Delaware child protection registry for any substantiated cases of child abuse/neglect? ☐ Yes ☐ No

If yes, explain: \_\_\_\_\_

I hereby authorize The Delaware Department of Services for Children, Youth and Their Families to provide the below named agency/organization with all substantiated cases of child abuse or neglect concerning me contained in the Delaware child protection registry. I further release the Delaware Department of Services for Children, Youth and Their Families, its officers and employees from any and all claims arising out of or in any way connected to the release or dissemination of any information concerning me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature (If applicant is under the age of 18) \_\_\_\_\_

### PART II. AGENCY/ORGANIZATION INFORMATION - (*MUST BE COMPLETED IN ORDER TO PROCESS*)

Agency Identification Number (if applicable): 265

Contact ID: 2569

Requesting Agency Name: Lake Forest School District

Address: 5423 Killens Pond Road, Felton, DE 19943

Phone: (302) 284-3020

Fax: (302) 284-4491

Contact Person: Cora Reed

Contact Email: cora.reed@lf.k12.de.us

### DSCYF USE ONLY:

The individual listed above (\_\_\_ is listed) (\_\_\_ is NOT listed) on the Delaware Child Protection Registry.

Date: \_\_\_\_\_ DSCYF Criminal History Unit \_\_\_\_\_