

ALMA PUBLIC SCHOOLS

VOLUNTEER FORM Alma Public Schools Consent Form to Obtain Conviction Criminal History File Searches

As a prospective volunteer of the Alma Public Schools, I understand that it is the policy of the Alma Public Schools to secure conviction criminal history information as part of the screening process using the information provided below. **(This form has been developed for your safety and the safety of other volunteers and students involved with Alma Public Schools).**

NAME _____
(Last) (First) (Middle)

Maiden Name/Names Previously used _____

Race White Black Asian or Pacific Islander American Indian/Alaskan Native
 Other/Unknown

Male Female Birthdate _____ Phone Number _____

I understand that the above information is required by the Central Records Division of the Michigan State Police, Lansing, Michigan, and by the Federal Bureau of Investigation. I authorize the Alma Public Schools to utilize the above information for the sole purpose of obtaining conviction only criminal history file searches. The district will also be checking the sexual offender's website.

I understand that information gathered in these criminal history file searches will be used by the Alma Public Schools in reaching voluntary status decisions.

(Signature of Prospective Volunteer)

(Date)

(School(s) that you will be volunteering at)

Name of Child(ren) you are volunteering with
or group (re: Mentor Program, After School
Program etc.)

Classroom Teacher

It is the policy of the Alma Board of Education that the Alma Public Schools will not discriminate in its educational programs and activities on the basis of age, race, creed, religion, color national origin, sex marital status, disability or any additional criteria identified by any applicable state or federal statute.

Please return this form to: Alma Public Schools
Central Office % Diane Stankewitz
1500 North Pine Avenue
Alma, MI 48801 (989) 466-7516

Revised: 4-02-18

**REVERSE SIDE OF THIS FORM MUST BE COMPLETED
-OVER-**

PLEASE READ BEFORE SIGNING:

I understand that:

- The information I have provided may be verified, and I give permission to the Alma Public Schools to make inquiry of others concerning my suitability to act as an Alma Public Schools Volunteer.
- In the course of volunteering for the Alma Public Schools, I may be dealing with confidential information, and I agree to keep said information in the strictest confidence.
- The relationship between the Alma Public Schools and volunteers is an “at will” arrangement and may be terminated at anytime without cause by either the volunteer or the Alma Public Schools; and
- I grant the Alma Public Schools permission to use my likeness, voice and words in television, radio, film, or any form to promote activities of the Alma Public Schools.

If there are any changes in the above information, I will inform the Alma Public Schools. I affirm that I have read the above information, and the information I have given is true and complete.

Signed _____
(Volunteer)

Date _____

Building(s) _____

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