

VOLUNTEER BACKGROUND CHECK AUTHORIZATION

School(s) at which you are volunteering: (circle all that apply): **Elementary** **Middle/High School**

In order to provide a safe and healthy environment for school sponsored activities, it is district practice to require a background check and to check references for anyone who may be in direct contact with our students. In doing so, we may review relevant public documents regarding criminal activity. For this reason, please provide the information below as requested. (Note: Current Iola-Scandinavia School District employees are not subject to an additional background check in order to volunteer within the School District.)

Full Legal Name (required) (including middle name) \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Complete this section only if you have ever lived in state(s) other than Wisconsin.

If yes, please list state(s), approximate time frame/year(s) you lived in each state, and full legal name while residing in each state.

State \_\_\_\_\_ Year \_\_\_\_\_ Legal Name: \_\_\_\_\_

State \_\_\_\_\_ Year \_\_\_\_\_ Legal Name: \_\_\_\_\_

Please list two references from non-relatives:

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

I authorize the School District of Iola-Scandinavia to process my application for volunteer service by reviewing my background. This may include checking references and reviewing relevant public documents regarding criminal activity. I hereby release the School District of Iola-Scandinavia, its employees, representatives, and such individuals, or organizations from all liability or claims for any damage whatsoever incurred obtaining for furnishing such information.

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

**For Internal Use Only – Print and attach background check results prior to forwarding to administration.**

Date of Request : \_\_\_\_/\_\_\_\_/\_\_\_\_ CIB Search Requested by: \_\_\_\_\_

Approved - No Criminal History  Referred to Building Administrator for Review of CIB Record

Review of CIB Record:

Approved by Building Administrator: \_\_\_\_/\_\_\_\_/\_\_\_\_

Background Check and Application Sent to District Administrator: \_\_\_\_/\_\_\_\_/\_\_\_\_

Approved  Denied - by District Administrator: \_\_\_\_/\_\_\_\_/\_\_\_\_