Dear Volunteer:

To provide for the safety of our students, and in accordance with the Texas Education Code, our district is requiring volunteers who work on our school campuses with students to have a criminal history check. If you would like to work on our campus as a volunteer or chaperone, please complete the information on the back of this sheet and return it to the school. Should any problem be reported on the criminal history record, the district would contact you by mail. If you only wish to participate at home as a home room parent, you may check that area and no criminal history check is required. If you have a child at another campus, you will be required to fill out an additional form. Thank you for your help.

Carthage Independent School District
2020 - 2021 Volunteer Application Form

_____Parent Volunteer   _____Student Observer
_____Community Volunteer   _____Student Teacher
_____Other:__________________________________

Please Print:
Volunteer's Name:________________________________________________________________________

       Last          First          MI          Maiden         Any other name used

Home Address:______________________________________________________ Email:____________________

                      Street Name and Number       City          State          Zip Code

Sex:_______ Race:_______ DOB:______________ SS Number:____________________

Driver's License No:______________________   Employer:_______________________________________

Work Phone:______________________            Home Phone:___________________________

Primary Language:______________________         Second Language:________________________

Student(s) Name(s):     _______________________________________ Grade:_________ Room:__________

                                         Grade:_________ Room:__________

                                         Grade:_________ Room:__________

I would like to help:

_______ Hours per week       ________ Hours per month

I would like to volunteer to help:

_______ In the classroom       ________ Doing work at home

Time I am available to work:

_______ I am flexible, can work at any time

_______ I can only work on these days:___________________________________________

_______ I can only work during these hours:_________________________________________

_______ I cannot volunteer to help during these times:_______________________________

Have you ever been arrested for, charged with, convicted of, or received deferred adjunction
concerning any criminal charge?               _______ Yes                     _______ No

If yes, please explain:______________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

I understand that Carthage ISD will conduct a criminal history check for school volunteers as required
by law and that if I do not meet background check requirements, I will not be able to volunteer on the
CISD campuses. I hereby affirm that all information provided in this application is true and accurate to
the best of my knowledge, and understand that any deliberate falsifications, misrepresentations, or
omissions of fact may be grounds for rejection of my application.

_________________________________________________________________________________
DPE Computerized Criminal History (CCH) Verification  
(AGENCY COPY)

I, ______________________________________, have been notified that a Computerized Criminal AGENCY COPY
APPLICANT or EMPLOYEE NAME (Please Print)
History (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers I supply.

Because the name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using the name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (Automated Fingerprint Identification System). I have been made aware that in order to complete this process I must make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy to be sent the agency listed below, and pay a fee of $24.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by your agency. Required for future DPS Audits)

____________________________________
Signature of Applicant or Employee

___________________________
Date

__ Carthage Independent School District
Agency Name (Please Print)

__________
Adana Woods
Agency Representative Name (Please Print)

___________________________
Signature of Representative

Please:
Check and Initial each Applicable Space

CCH Report Printed:
Yes_____ No_____ ________ Initial

Purpose of CCH:____ Volunteer

Hire____ Not Hired_____ ________ Initial

Date Printed:______________ ________ Initial
criminal history check is required. If you have a child