LINDEN COMMUNITY SCHOOLS
VOLUNTEER REGISTRATION FORM
THIS INFORMATION WILL BE USED FOR A CRIMINAL BACKGROUND CHECK

In an effort to comply with Board of Education Policy and for the safety of your children, we request the following information if you intend to volunteer during the current school year. As part of our ongoing commitment to school safety, our district requires volunteers who work with or have access to our students to undergo a criminal history background check. **Please refer to Board of Education Policy 8120.09 Volunteers**.

These background checks are conducted through the Michigan State Police iChat system and are designed to screen for any past behavior or criminal history that may pose a risk to children. The checks include the Sex Offenders Registry (SOR) list, the Internet Criminal History Access Tool (ICHAT) criminal history records check, and the Offender Tracking Information System (OTIS). This process is conducted with complete confidentiality. The information obtained is used solely to ensure the safety and well-being of our students. While we encourage all parents and guardians to actively engage with our school community and volunteer their time to support school activities, it's imperative that we not jeopardize the safety of our students.

Please follow the process outlined below to ensure that the volunteer background check process can be completed properly,

- All volunteers must complete their volunteer application at least five (5) school days prior to the activity occurring. You will be required to check in on the day of the activity.
- Since the iChat system does not notify us if there has been a change to an individual's criminal history, iChat results, for volunteers, will be good until the end of the first semester. If a parent/guardian wishes to volunteer during the second semester an iChat background check will need to be conducted.
- iChat results will be good for all buildings within the district.
- Volunteer coaches must complete the form before each season they are involved in.

Volunteering in Buildings(s) Please check all that apply:

- ☐ Early Childhood Center
- ☐ Central Elementary School
- ☐ Hyatt Elementary School
- ☐ Linden Elementary School
- ☐ Linden Middle School
- ☐ Linden High School
- ☐ Multi-Purpose Building
- ☐ Other _____

_____ _____ _____
LAST NAME **FIRST NAME** **MIDDLE NAME**

_____
OTHER/FORMER NAMES

_____ _____ _____ _____
STREET ADDRESS **CITY** **STATE** **ZIP**

_____ _____ _____ _____
YOUR DATE OF BIRTH (MONTH/DATE/YEAR) **RACE** **GENDER** **(AREA CODE) + CELL PHONE**

_____
PROGRAM(S) YOU WISH TO VOLUNTEER/CHAPERONE (FIELD TRIP, SCHOOL-WIDE EVENT, ATHLETIC EVENT VOLUNTEER, ETC)

_____ _____
STUDENT(S) NAME(S) **STUDENT'S CLASSROOM TEACHER (ELEMENTARY ONLY)**

_____ _____
YOUR SIGNATURE **TODAY'S DATE**