



Volunteer Background Check Form

2400 MASON EAGLES DR.
ERIE, MI 48133
ERIEMASON.K12.MI.US

Dear Potential Mason Consolidated Volunteer:

First and foremost, Mason Consolidated Schools appreciates your willingness to serve as a volunteer in our district and become a substantial and vital part of our school programs!

To maintain a safe school environment, the State of Michigan requires by law that school districts perform background checks of school employees. The Board of Education also adopted policies specifically for individuals who volunteer in the district. Background checks of volunteers are not required by law but conducted under district policy to ensure the protection of children in the care of Mason Consolidated Schools and the safety of students that may encounter volunteers during school-sponsored activities.

District policy requires any volunteer who works with or has access to students to be screened through the Public Sex Offender Registry (PSOR), the Internet Criminal History Access Tool (ICHAT) criminal history records check, and the Offender Tracking Information System (OTIS) prior to being allowed to participate in any activity or program.

All volunteers must meet the mandates as outlined in the policies as a condition of service. *Any applicant declining to complete a Volunteer Background Check form will not be considered or allowed to serve as a volunteer.*

All records are kept confidential and will not be distributed to anyone not directly involved in the screening process. The District reserves the right to perform additional background checks at any time for the duration of the volunteer's service in the District. This can be performed regardless of self-disclosure or inappropriate behavior following the initial check.

Volunteer Guidelines & Expectations:

- "Volunteer" - a person from the community who contributes their services on a regular basis without charge.
- Volunteers are assigned to help the regular staff provide better service to students.
- Volunteers shall work only under direct supervision of the designated staff member.
- Volunteers must abide by school, team, and program regulations, rules, or decisions. It is also expected that they report any violations of the regulations, rules, or decisions to the building Principal.
- Volunteers are not to make personnel decisions (i.e., disciplinary actions, etc.).
- Volunteers are not to deal directly with parent concerns and should refer all contacts by parents to the regular staff member.
- Volunteers are expected to maintain confidentiality at all times. Disclosing student information will result in the removal of volunteer privileges.
- Volunteers are not to treat injuries (except emergency First Aid) or prescribe rehabilitation programs.
- Volunteers are not to receive any compensation for their services. The experience may be added to their resume, and we will gladly provide references.
- A volunteer is personally responsible for their actions. Inappropriate conduct may result in the individual being asked to discontinue their relationship with the program.

Please complete both sides of the attached form and return it to your building administrator. Background checks will be done on an annual basis. The background check process is time-consuming; therefore, appropriate lead time must be given to ensure background checks are completed prior to volunteer service at the school or for any function conducted by the school.

Again, we thank you for your willingness to volunteer at Mason Consolidated Schools and appreciate your time and efforts in assisting the operation of the schools!

Sincerely,
Kelli Tuller, Superintendent



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School Year: _____

Please complete both sides of this form and return the completed form, along with a copy of your driver's license, to the respective building office at Mason Consolidated School District. Questions or concerns should be directed to the Superintendent/Business Office at 734-848-9301.

To ensure the protection of children in the care of Mason Consolidated School District, school policy requires any volunteer who works with or has access to students to be screened through the Internet sites for the Sex Offenders Registry (SOR) list, the Internet Criminal History Access Tool (ICHAT) criminal history records check and the Offender Tracking Information System (OTIS) prior to being allowed to participate in any activity or program. The background check is a name check only and is based on individual identifiers. *Any applicant declining to complete a "Volunteer Background Check" acknowledgment form will not be considered or allowed to serve as a volunteer.*

ALL ANSWERS MUST MATCH YOUR DRIVER'S LICENSE

Full LEGAL Name: _____ Date: _____
(first, middle, and last)

ANY Previous Names: _____
(FULL name; if more than one, separate with commas)

DOB: _____ Gender: _____ Phone: _____
(mm/dd/yyyy)

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

I am requesting to volunteer in the following area(s):

Chaperone *(list the field trip(s), activities):* _____

Classroom *(list teacher name):* _____

Coach* *(list sport & grade level):* _____

**Head volunteer coaching positions require a fingerprint-based State of Michigan/FBI background check.*

Please answer the following questions. If you answer Yes to any of the questions, provide specific details on the reverse side of this form (i.e., date and offense/conviction that occurred, details of the conviction, date, and status of investigation that is ongoing, etc.).

Have you ever pled guilty or been convicted of a **felony** in a state or federal court? Yes No

Have you ever pled guilty or been convicted of a **misdemeanor** in a state or federal court? Yes No

Are you the subject of a **current criminal investigation** or have **pending charges** against you? Yes No

Mason Consolidated Schools reserves the right to 'approve' or 'deny' any volunteer service upon review of the background check returned through ICHAT/SOR/OTIS. The determination will be based upon the individual's fitness to have responsibility for the safety and well-being of children. Providing false information, or information contradicting the background check information, is grounds for immediate volunteer denial.

By affixing your signature to this form, you acknowledge your statements are to be true and give full consent to complete a name-based background check through ICHAT/SOR/OTIS.

Signature: _____ Date: _____ Building Admin. Initials: _____

SUPERINTENDENT OFFICE USE ONLY

Approved

Denied

Date of Review: _____ Initials: _____



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I have offered my services as a volunteer to help the School District in the following areas:

I agree to abide by all relevant Board policies and administrative guidelines while on duty for Mason Consolidated Schools. I understand that, although I am covered under the District's liability insurance policy, I am not covered by its health insurance policy nor am I eligible for workers' compensation. Should I become ill or suffer an accident while doing volunteer work for the District, I agree that I shall be responsible for any and all hospital and medical charges that may accrue.

I further understand that, as a volunteer, I am not in any manner considered an employee of the District or entitled to any benefits provided to employees. I further release the Board of Education from any and all liability for any damages, whatever their nature, which may result as a consequence of my volunteer services.

For the protection of the children in the school, the District is required by law to inquire of its staff members whether or not they have ever been convicted of a crime related to children. We would appreciate your cooperation by indicating that you have never been convicted of any of the following offenses: *aggravated murder, murder, voluntary manslaughter, involuntary manslaughter, felonious assault, aggravated assault, assault, aggravated menacing, abuse or neglect of a child, kidnapping, abduction, child stealing, criminal child enticement, rape, sexual battery, corruption of a minor, gross sexual imposition, importuning, voyeurism, public indecency, felonious sexual penetration, compelling prostitution, promoting prostitution, procuring prostitution, disseminating matter harmful to juveniles, pandering obscenity, pandering obscenity involving a minor, pandering sexually-oriented matter involving a minor, illegal use of a minor in nudity-oriented material or performance, endangering children, contributing to the delinquency of children, carrying concealed weapons, improperly discharging a firearm at or into a school or house, corrupting another with drugs, placing harmful objects in or adulterating food or confection.*

I have read the above and have never been convicted of any of the listed offenses.

Volunteer Signature: _____

District Witness: _____

Date: _____