



VOLUNTEER/CHAPERONE BACKGROUND CHECK

Acknowledgment Form

Non-employment Background Checks Only

Service to provide: _____ Date to Provide Service: _____

In order to ensure the protection of children in the care of Northwest Community Schools, school policy requires, prior to any and all persons providing a volunteer service at the school or for any function conducted by the school; all potential volunteers complete a State of Michigan background check. The background check is a name check only, through the State of Michigan ICHAT system, and is based on individual identifiers. Any applicant declining to complete a “Volunteer/Chaperone Background Check” acknowledgment form will not be considered.

POTENTIAL VOLUNTEER/CHAPERONE INFORMATION – One Application Per Person

Full Printed Name _____	
Maiden name or other name(s) previously used: _____	
Phone Number: _____	
DOB: _____ [mm/dd/yyyy]	Sex: _____ Eye Color: _____ Hair Color: _____ Height: _____

STUDENT INFORMATION – List All Current Students

Student Name:	Grade:
Relationship to Student:	Event/Activity:
Student Name:	Grade:
Relationship to Student:	Event/Activity:
Student Name:	Grade:
Relationship to Student:	Event/Activity:
Student Name:	Grade:
Relationship to Student:	Event/Activity:

HISTORY INFORMATION

- 1) Have you volunteered at Northwest Community Schools before? **Yes** **No**
- 2) Have you ever pled guilty, or been convicted of a felony in a state or federal court? **Yes** **No**

Date and state offense/conviction occurred: _____

If yes, provide a detailed description of the conviction: _____

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

Date and state offense/misdemeanor occurred: _____

If yes, provide a detailed description of the conviction: _____

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

Date and state the investigation is ongoing: _____

If yes, provide a detailed description of the investigation or pending charges: _____

Northwest Community Schools reserves the right to “approve” or “deny” any volunteer service upon review of the background check returned through ICHAT. The determination will be based upon the individual’s fitness to have responsibility for the safety and wellbeing of children. Providing false information, or information contradicting the background check information, is grounds for immediate volunteer denial. The district has the right to recheck a criminal history periodically throughout the current school year.

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. You also agree to abide by all policies, rules/regulations and procedures of the district.

Signature: _____
Date Signed: _____

Please return completed form to Northwest Community Schools Administration Office. Questions or concerns, please contact MaryJo Heckaman at 517-817-4739.

OFFICE USE ONLY

Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Date _____	Central Office Staff _____
Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Date _____	Superintendent Initials _____