

# SCHOOL DISTRICT OF FLORENCE COUNTY

The School District of Florence County defines a "Registered Volunteer" as a person who give his/her services to the District without monetary compensation and is successfully registered as a volunteer with the District. Registered Volunteers perform services under the direction and supervision of District personnel. **District volunteers are not covered by any District health or accident insurance, or worker's compensation. Relative to any injury or loss of property while volunteering, the District assumes no additional liability beyond that which already exists under applicable law.**

## Volunteer Background Disclosures and Consent for Background Check

(please print clearly; "\*" indicates items for which you should see the reverse side of this Form for further information and notices)

**1. Current Name, Previous Name(s) or Alias(es), and Date of Birth:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
First Name Middle Name Last Name Date of Birth (MM / DD / YYYY)

If you have used any names for yourself, other than those listed above (e.g., a maiden name), identify ALL of those previous names or aliases:

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

**2. Phone #:** \_\_\_\_\_ **3. Social Security Number \*:** \_\_\_\_\_ **4. Driver's License #:** \_\_\_\_\_

**5. Current Address:**

\_\_\_\_\_  
Street Address City State Zip Code From (date) \_\_\_\_\_ to present.

**6. Previous Address(es) During Last 10 Years:**

Street Address City County State Zip Code From (MM/YY) Until (MM/YY)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If you do not know the exact street address, provide at least the street name and all other information. Attach additional sheets if needed.)

**7. List any other states/countries (other than those listed above) in which you have lived as an adult:**

\_\_\_\_\_

**8. PRIOR CONVICTIONS\*: Check the appropriate box. List all prior convictions\* for violations of laws or ordinances, other than minor traffic violations.**

I have **not** been convicted of any violation of a law or ordinance in any jurisdiction, other than minor traffic violations (and excluding private civil suits).

I **do** have a record of a previous conviction, and each such conviction is listed below:

Charge: \_\_\_\_\_ County/State \_\_\_\_\_ Date (MM/YY) of Conviction \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach additional sheets and/or additional explanation, as needed.)

**9. PENDING ARRESTS/CHARGES\*: Do you have any pending charges that have been filed against you? Check the appropriate box. If "yes," identify ALL such pending charges\*.**

**No.** There are no charges presently pending against me in any court or law enforcement jurisdiction, other than minor traffic violations.

**Yes.** Identify each of the alleged violation(s):

Charge: \_\_\_\_\_ County/State \_\_\_\_\_ Date (MM/YY) Charged \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach additional sheets and/or additional explanation, as needed.)

**10. SEX OFFENDER REGISTRY / VULNERABLE PERSON ABUSE REGISTRY: Check the appropriate boxes; you may provide additional explanation.**

Yes No

Have you, at any time, been included on a sex offender registry in any jurisdiction?

Have you, at any time, been included on any registry for abuse committed as a caregiver or committed against any vulnerable person in any jurisdiction (e.g., the Wisconsin Caregiver Misconduct Registry or any similar registry)?

**THIS FORM IS TWO-SIDED. PLEASE TURN OVER.**

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**\* NOTICES / INFORMATION RELATED TO THIS FORM:**

1. **Request for Social Security Number:** The School District uses the Social Security Number provided by the individual filling out this Form solely to verify the information disclosed on this Form and to facilitate any search for additional information related to an applicant's pending charges, prior convictions, or driver's record. Pursuant to the federal Privacy Act, the School District is required to inform the applicant that providing his/her Social Security Number on this Form is voluntary. If the individual filling out this Form does not voluntarily provide his/her Social Security Number as requested, the School District will determine whether or not it is still able to conduct a timely and satisfactory background check without that information. To the extent the District, in its sole discretion, elects to use an alternate process to conduct a background check due to the absence of a valid Social Security Number, the applicant may be required to pay any additional costs associated with the alternate process (e.g., fingerprinting).
2. **Disclosures of Prior Convictions and Pending Charges:** The following additional information/instructions apply to the mandatory disclosures of prior convictions or pending charges that are required by this Form:
  - a. In the section requiring disclosure of "PENDING ARRESTS/CHARGES," the individual filling out this form must list only matters that remain pending. If any past charge was fully dismissed, or if the individual was acquitted (i.e., found innocent) of the alleged violation(s), then the arrest or charge need not be disclosed. If the individual was convicted of any alleged violation, that information should be disclosed in the section of the Form that addresses the individual's prior convictions.
  - b. Prior convictions and pending charges disclosed on this Form will be considered by the District only to the extent permitted by applicable state and federal law.
  - c. If the School District's background check returns law enforcement record or court record information (e.g., criminal history) that the District deems relevant to the decision to approve the applicant as a school volunteer, the applicant will be provided with an opportunity to provide additional information to the District about the context, accuracy, and/or completeness of such information before any final determination is made.
  - d. **None** of the following reasons are valid grounds for failing to disclose a prior conviction: (1) full payment of a fine; (2) completion of a jail term or prison sentence; (3) the completion of any period of probation or supervision following a conviction; or (4) the passage of a certain period of time.
3. **Fair Credit Reporting Act:** Unless the individual filling out this Form is otherwise notified by the District in writing, the School District will not (1) seek to obtain a personal credit history report or other Consumer Report regarding the individual; or (2) engage the services of (or use any report obtained from) a Consumer Reporting Agency in connection with conducting the School District's background check.

**IMPORTANT: READ THIS SECTION CAREFULLY BEFORE SIGNING, DATING, AND RETURNING THIS FORM TO THE DISTRICT**

By signing and dating this Form in the space provided below, I acknowledge that I have read, understand, and agree to all of the following:

1. I have personally completed and carefully reviewed the information I have provided on this Form.
2. I understand and agree that all information and records that I provide (directly or indirectly) to the School District in support of my application to serve as a school volunteer (including my responses on this Form) must be accurate, truthful, materially complete, and not misleading. I also accept an ongoing duty throughout any period that I may serve as School District volunteer to supplement and correct the information and records that I have provided if it comes to my attention that anything was inaccurate, false, misleading, or materially incomplete.
3. I authorize and give my consent to the School District and to its designated officers, employees, or agents to conduct a background check in order to assess and determine my character and my fitness, skills, qualifications, and ability to successfully serve as a School District Volunteer. The District's investigation and review of my background may include inspection of law enforcement records; driving records; court records; personal and professional references; and other sources of information which may, in the discretion of the District, be relevant to my application EXCEPT that the District will NOT (1) seek or review information where prohibited by applicable law; or (2) seek any medical records unless the School District first consults with me and, to the extent required by law, obtains my consent for the disclosure of such records.
4. I understand and acknowledge that the School District considers the completion of this Form to be necessary to the consideration of my candidacy as a School District volunteer, and that the District will act in reliance on the information and any records that I provide. I understand that failure to consent to the background check, or my failure to reasonably cooperate with the background check process, will result in my ineligibility to serve as a volunteer.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE (mm/dd/yyyy)

**FORMAL ADMINISTRATOR APPROVAL AND AUTHORIZATION:**

- The School District has reviewed this applicant's background information, found it to be complete and acceptable in relation to the proposed volunteer activities, and authorizes the above-named applicant to serve as a School District volunteer, with any additional clarifications as to the scope of authorization, or period of approval, as noted below:**

\_\_\_\_\_  
\_\_\_\_\_

Administrator's Signature and Title: \_\_\_\_\_ Date: \_\_\_\_\_