



# Volunteer Background Check Form

Name: \_\_\_\_\_  
Last First Middle Initial

\_\_\_\_\_  
Other (Nickname, Maiden Name, etc.)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

- Male  
 Female

Race:

- Caucasian  
 African American  
 Asian or Pacific Islander  
 American Indian or Alaskan Native  
 Hispanic  
 Unknown/Other\_\_\_\_\_

Address: \_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City State Zip

Phone: \_\_\_\_\_

Children attending Fruitport Community Schools? \_\_\_Yes \_\_\_No

Child's Name	Teacher/Room #	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

What is your affiliation/reason for volunteering in the building? \_\_\_\_\_  
\_\_\_\_\_

I understand that it is necessary to have a Michigan State Police background check done before I volunteer in Fruitport Community Schools. **I understand that the information submitted will remain confidential. A copy of my valid State of Michigan ID/Driver's License is attached.** I agree to allow district-designated personnel from Fruitport Community Schools to submit the information above to the Michigan State Police ICHAT (Internet Criminal History Access Tool) for review. I understand that this form is to be submitted at least five school days prior to my desired date of volunteering.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

**~FOR OFFICE USE ONLY~**

**Copy of ID Attached: \_\_\_Yes \_\_\_No    Date Check Completed: \_\_\_\_\_**

**Results of Check: \_\_\_Approved \_\_\_Denied**

**Comments: \_\_\_\_\_**

Dear Families,

Volunteers are an essential part of a successful school. As important as volunteers are so is the safety of our students and staff. In an effort to maintain the safe and quality environment of Fruitport Community Schools, background checks are required on all volunteers, and will be completed by approved school personnel.

If you plan to volunteer at any point during the school year the following information must be completed along with a copy of a valid identification card that provides your name and date of birth (example: a driver's license). Any and all information discovered thru the check will be confidential; because circumstances change this background check process must be completed each school year.

**Please take a moment to complete the bottom portion of this handout and return it to the school office with a copy of a valid identification card.** Please complete only one form per family per building. Each volunteer must have a separate form completed and signed by the person requesting to serve as a volunteer.

We appreciate your cooperation with this matter.

Sincerely,

Fruitport Administration

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