School Name: <u>Chisholm Elementary</u>

2019-2020 SCHOOL YEAR
VOLUNTEER/CHAPERON
Background Check Request Form

This form is to be completed in order for you to volunteer/chaperon in the Montgomery County Board of Education campuses and to attend field trips. Please complete the entire form. Background checks will not be performed on individuals submitting incomplete forms. <u>Complete one form per volunteer/chaperon</u>, even if you have more than one school or student.

TYPE OR PRINT LEGIBLY _____
<div align="center">Last Name</div>

_____   _____   _____
<div align="center">First Name   Middle Name   Maiden Name</div>

_____   _____   _____
<div align="center">Street   State   Zip Code</div>

_____   _____
<div align="center">Complete Social Security #   Date of Birth</div>

<u>IF YOU FAIL TO ANSWER THE FOLLOWING QUESTION TRUTHFULLY YOU WILL NOT BE ALLOWED TO VOLUNTEER/CHAPERON WITH THE MONTGOMERY PUBLIC SCHOOLS.</u>

Have you ever been arrested, charged or convicted of a CRIMINAL OFFENSE (OTHER THAN A MINOR TRAFFIC OFFENSE)?   YES ___   NO ___   If **yes**, please attach an explanation with details including dates, allegations, and dispositions.

I certify that the above information is true, correct and complete on this form. I hereby give the school system permission to complete a background investigation. This investigation may include such information as criminal or civil convictions and other offenses. Furthermore, I agree to abide by all policies and procedures as delineated in the Montgomery County Board of Education policy manual and to notify MPS if I am charged or convicted of any new violent offense or offense involving children during the 2019-2020 school year.

Information on this form will be used <u>ONLY</u> for purposes of completing the background check. You may not begin to volunteer/chaperon until your background information has been received, evaluated, and the school(s) has been notified you are cleared to serve as a volunteer/chaperon. Having a criminal history will not automatically prohibit you from serving as a volunteer/chaperon. Please direct any questions about this process to the Montgomery Public School Security Chief at (334) 230-0651.

Parent/Volunteer Signature _____   Date _____

Teacher _____   Student_____