

VOLUNTEERS RELEASE FORM FOR VOLUNTEER CRIMINAL HISTORY AND SEX OFFENDER RECORDS CHECKS

Please print using black ink. Please fill in all required information.

REQUIRED INFORMATION:

LAST NAME: _____

FIRST NAME: _____

MIDDLE NAME: _____

RACE (CIRCLE ONE): WHITE BLACK ASIAN or PACIFIC ISLANDER AMERICAN INDIAN or ALASKAN NATIVE OTHER

SEX (CIRCLE ONE): MALE FEMALE

MONTH OF BIRTH: _____ DATE OF BIRTH: _____ YEAR OF BIRTH: _____

MAIDEN/PREVIOUSLY USED NAME(S), IF ANY: _____

MICHIGAN DRIVER'S LICENSE NUMBER: _____

COPY ATTACHED ARE YOU WILLING TO DRIVE

Table with 3 columns: STUDENT'S NAME, TEACHER, RELATIONSHIP TO STUDENT. Includes three rows of blank lines for data entry.

VOLUNTEER DISCLOSURE

By virtue of my signature, I certify that the name and personal descriptive information is accurate as recorded on this document. I recognize my right to challenge the accuracy or completeness of the information contained in a criminal history record check, sex offender registry check, or any other records check.

Signature of Volunteer

Date