

ROCHESTER COMMUNITY SCHOOLS
VOLUNTEER GUIDELINES AND ICHAT AUTHORIZATION FORM

2017-2018

Volunteer Guidelines

Volunteers to the Rochester Community Schools may be used on a temporary basis to give support to a classroom or program. The following guidelines are to be used as volunteers are assigned to classrooms or programs:

- Volunteers are appreciated but should not be a distraction to the school environment.
- If a volunteer will be with students for a significant length of time **without a RCS employee being present**, or will be with students on **a regular basis**, that volunteer will be required to have a Michigan State Police Internet Criminal History Access Tool (ICHAT) screening annually. The results of this ICHAT criminal background check will remain confidential and will only be used by School District administration to determine if you have been convicted of an offense that would otherwise prohibit you from working in our schools.
- Please only complete **one form per school year**. ICHATs must be run every school year.
- You **MUST** attach a copy of your Driver's License or State ID with this form in order for it to be processed.

ICHAT AUTHORIZATION -

Please return this form to your building secretary and/or appropriate department for review.

PLEASE PRINT CLEARLY * = Required Field

*Teacher's Name: _____ *School Building(s): _____

*Legal Last Name: _____ *Full Legal First Name: _____ *MI: _____

*Phone Number: _____ Alternate Phone Number: _____

*Student(s) Name(s): _____

*Race: Indicate best option per ICHAT system choices: Check one

- White
- Black
- Asian or Pacific Islander
- American Indian or Alaskan Native
- Unknown/Other

*Gender: Male Female

*Birth Date: _____ / _____ / _____
MM DD YYYY

*Maiden/Other Last Name: _____ *Other First Name: _____ *MI: _____

*Reason for Background Check: Check all that apply

- Band Boosters
- Classroom Volunteer
- Camp Chaperone
- Club Sponsor: * _____
- College Field Placement
- Enrichment/BASES Program: * _____
- Field Trip Chaperone - *Date of Trip: _____
- Student Teacher
- Summer Music Theatre
- Volunteer Coach / Assistant Coach
- Other: _____
- Other: _____

My signature below is representative of my approval for the Rochester Community Schools Human Resources Department to conduct a criminal background check against my records using the Michigan State Police ICHAT system.

*Applicant Signature: _____ Date: _____
(No electronic signatures will be accepted.)

(For Office Use Only)

BUILDING SECRETARY: To avoid running duplicate background checks and accruing additional fees, please initial here that you have reviewed this form and have checked the master list before sending to Central Office: _____

Approved Date: _____

Not Approved Date: _____