

MONROE PUBLIC SCHOOLS CRIMINAL HISTORY CONSENT FORM VOLUNTEERS/CONTRACTORS



As a prospective volunteer of Monroe Public Schools, I understand that it is this school district's policy to secure conviction criminal history information as part of their screening process using the information provided below.

First Name	Middle Name
Race:	Gender:

Please list all Monroe Public Schools Buildings in which you will be providing services:

I UNDERSTAND THAT THE INFORMATION IS REQUIRED BY THE CENTRAL RECORDS DIVISION OF THE MICHIGAN STATE POLICE, LANSING, MICHIGAN. I FURTHER UNDERSTAND THAT A CONVICTION RECORD DOES NOT NECESSARILY PREVENT THE ACCEPTANCE OF VOLUNTEER/CONTRACTED SERVICES. I AUTHORIZE MONROE PUBLIC SCHOOLS TO UTILIZE THE ABOVE INFORMATION FOR THE SOLE PURPOSE OF OBTAINING INFORMATION REGARDING A CRIMINAL CONVICTION.

Pursuant to Public Act 138 of 2005, I represent that (check all that apply):

- 1. I have not been convicted of or pled guilty or nolo contendre (no contest) or am the subject of a finding of guilt by a judge or jury of any crime.
- 2. I have been convicted of, or pled guilty or nolo contendre (no contest) or am the subject of a finding of guilt by a judge or jury for the following crimes (attach a separate sheet of paper to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction):

Felony	Misdemeanor
Felony	Misdemeanor
Felony	Misdemeanor

In signing this form, I understand and agree that:

- 3. If I have been convicted of a listed offense, my volunteer/contracted services shall be terminated. I also understand that if I have been convicted of a felony, other than a listed offense, the superintendent, or other chief administrator must approve, in writing, my volunteer/contracted assignment.
- 4. As a volunteer/contractor in the school district, I understand that use of tobacco, alcohol, or illicit drugs on school property or at school sponsored events or activities is strictly prohibited.
- 5. I agree to release the District from any obligation should I become ill or suffer any injury because of my volunteer/contracted services.
- 6. The information included will be utilized to perform multiple background checks as the District deems necessary during the duration of the volunteer/contracted services.
- 7. I must submit a copy of my government issued photo ID with this completed form for the background check to be completed.