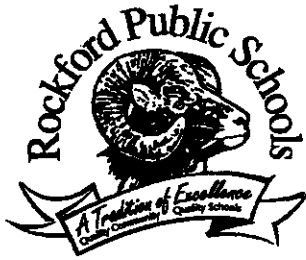


School Year 2006-2007  
THIS FORM WILL BE KEPT CONFIDENTIAL



*The Rockford Public Schools, parents and volunteers have worked hard together to create true community schools. Our students have achieved higher and have had more success academically due to this partnership. In a continued effort to keep our schools as safe as possible, we are asking volunteer parents and community members to submit to criminal background checks. The Volunteer Consent Form and any response will be kept confidential with the School Security Department (Bob Goethal, Director of Security), Principal of the school building, and Superintendent (or designee). Thank you for your understanding with this matter and for all that you give to our schools, community and children. You need only submit this form once per school year.*

**VOLUNTEER CONSENT FORM**  
**ONE FORM PER PERSON COVERS ALL STUDENTS AND ONE NAME PER FORM.**  
(Check one box, please)

Parent/Guardian       Grandparent       Other \_\_\_\_\_

PLEASE PRINT:

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

Race: \_\_\_\_\_ Sex: \_\_\_\_\_

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

MI Driver License Number: \_\_\_\_\_

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

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

LIST ALL BUILDINGS YOU WILL BE VOLUNTEERING IN: \_\_\_\_\_

I understand the Central Records Division of the Michigan State Police, Lansing, Michigan, requires the above information. I authorize Rockford Public Schools to utilize the above information for the sole purpose of obtaining a conviction-only criminal history file search.

VOLUNTEER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

4100 Kroes, Rockford, Michigan 49341  
Phone: 616-863-6034 -- Fax: 616-866-7112

**EXCERPT FROM**  
**9230-R School Volunteers**

The Role of the School Resource Officer (SRO)

Persons wishing to volunteer will submit the completed "Volunteer Consent Form" to the building principal, director, and/or supervisor, who will forward the form to the School Resource Officer (SRO). The SRO will initiate a background check via the Michigan Public Sex Offender Registry (PSOR) Inquiry and the Michigan State Police Internet Criminal History Access (ICHAT), or any other available and/or newly-developed or generated background check modes.

The SRO will be specifically looking for people who have been convicted of any crime of an assaultive behavior, of a crime involving firearms or weapons, or of the following crimes as described in Section 1539(a)(1) and (b)(2) of the Michigan School Code:

*...criminal sexual conduct in any degree, assault with intent to commit criminal sexual conduct, an attempt to commit criminal sexual conduct in any degree, felonious assault on a child, child abuse in any degree, or an attempt to commit child abuse in any degree; cruelty, torture, or indecent exposure involving a child; or a violation of Section 7410 of the Public Health Code, Act 368 of the Public Acts of 1978, being Sections 333.7410 and 333.7416 of the Michigan Compiled Laws...*

If after the background check it is found that a volunteer has been convicted of any of the above crimes, the SRO will notify the building principal, director, and/or supervisor and the Superintendent or designee. The administrator of the building or program will notify the volunteer of the finding(s) and s/he is subject to being prohibited from volunteering with the Rockford Public Schools. All background checks, volunteer forms, and any reported convictions of volunteers as listed above, will be kept confidential with Administration and filed in the office of the SRO.

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*(Office Use Only)*

DATE RECEIVED: \_\_\_\_\_ DATE SCREENED: \_\_\_\_\_

SCREENER: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

VOLUNTEER STATUS:

OK

DENIED

IF DENIED, DATE REPORTED TO BUILDING/PROGRAM SUPERVISOR: \_\_\_\_\_