Alexander County Schools VOLUNTEER PROFILE FORM

Alexander County Schools have developed a volunteer/chaperone screening process to help ensure the safety of our children.

- School Level and Level 1 Volunteers will complete section 1 and 2 of this form and return it to the school principal at least 7 days before they begin their volunteer work on campus.
- Level 2 Volunteers as well as chaperones <u>for overnight field trips</u> must complete section 1, 2, and complete the online background check through Background Investigation Bureau (BIB). The link can be found on the HR Website.

First Name	Middle/Maiden	Last Name		
Home Address, City, Sta	te, Zip			
Home Phone	Cell Phone	E-mail Address		
Employer		Business Phone		
Business Address, City, S	State, Zip			
Have you ever been emp	loyed by ACS? Yes No	If yes, give dates of employment:		
For Field Trips O	nly:	Date of Trip:		
Destination of Trip		School		Grade
		Contact Person for Trip		
Section 2: Refer Please print. Comp 1. Name	blete the following information for <u>th</u>	ree non-family references. Relationship		
Section 2: Refer Please print. Comp 1. Name Address	olete the following information for <u>th</u>	Relationship City	State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone	olete the following information for <u>th</u>	Relationship City How long have you known this person?	State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone 2. Name	blete the following information for <u>th</u>	Relationship City	State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone	blete the following information for <u>th</u>	Relationship City How long have you known this person?	State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone 2. Name Address	olete the following information for <u>th</u> Street	Relationship City How long have you known this person? Relationship	State State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone 2. Name Address Phone	Street	Relationship City How long have you known this person? Relationship City	State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone 2. Name Address Phone	Street	Relationship City How long have you known this person? Relationship City How long have you known this person? Relationship	State	Zip
Section 2: Refer Please print. Comp 1. Name Address Phone 2. Name Address Phone 3. Name Address Address	Street	Relationship City How long have you known this person? Relationship City How long have you known this person?	State	Zip

Date

Signature