RETURNING VOLUNTEERS 2024-2025

This packet is for volunteers who already have a background check and packet on file with the District from a previous year and need to update their background check in order to continue volunteering. If you have never volunteered for BSD before, please see your child's school secretary to obtain a "NEW VOLUNTEERS" packet.

A Volunteer is defined as a person who will have direct personal contact with a child or children. To continue to be an approved Volunteer in the Brandywine School District, a volunteer must follow the steps below AND be cleared through the Human Resources Department to continue servicing the District. PLEASE NOTE: Criminal Background Clearances are only valid for 12-months, per State regulations. If you wish to continue volunteering with BSD after 12 months of completing a background check, you must complete another BSD background check:

<u>Volunteer Responsibility - Complete and return all of the following forms to the School Office Secretary:</u>

- 1. Volunteer Information Form
- Delaware Child Protection Registry Request Form: All information with an * must be completed. Forms will not be accepted without a signature (If the Volunteer is under 18 years old must be signed by a Parent or Guardian.)
- 3. <u>Criminal Background Check Receipt:</u> Please read Page 4 of the packet carefully for instructions. The fee is currently \$38.00. A Payment Receipt will be given to you upon completion of the appointment. A copy must be returned with this form (see example on page 6). Copies of a Volunteer's Criminal History will not be accepted. (If the volunteer is under 18 years old must be accompanied and signed by a Parent or Guardian.)

All documents are to be collected by the individual school office. <u>Complete</u> packets are to be sent from the school to the Human Recourses Office once ALL of the following have been completed:

	•	Completed Volunteer Information Form	
	•	Completed Delaware Child Protection Registry Form	
	•	Criminal Background Check (IdentoGO) Receipt	
	•	Attach eSchool printout of Legal Guardians for the students listed	
	•	Signature of School Principal/Supervisor	
		arces Department will notify the School Principal or Supervisor when a formation will be added to a shared Google Doc that lists all approved	en
Signature of	Prir	cipal/Supervisor: Date:	 _

Office Personnel Submitting This Information

Date Submitted

For any additional information you may have about this process, please call the Human Resource Department at 302-793-5009.

Volunteer Information Form

Volunteer Position (Please check as applicable)	
☐ Coach/Athletics ☐ Chaperone ☐ Other	
Volunteer Name	Today's Date
Student Name and School (1)	
Student Name and School (2)	
Student Name and School (3)	
Email address	Daytime Phone Number
A Volunteer is defined as a person providing volunt Serving Entity and who has Direct Access to studen	
District expectations must be adhered to which promotes th and staff. As a Volunteer for the Brandywine School District,	
Model appropriate behavior including appropriate dischool premises (this includes all areas inside and ou consume alcohol or other substances that could impainvolved in school-related activities.	itside of school property), and not
Abide by all district and/or school rules and policies related activities, whether they occur at school, off-schours.	
Signature of Volunteer: Date:	:

The determination of suitability as a Volunteer shall be made by the Public School pursuant to The Delaware Administrative Code and any other criteria the Public School may establish. The Public School shall communicate the results of the determination of suitability to the person, in writing. If a determination is made to deny suitability based on the criminal history, the person shall have an opportunity to appeal for reconsideration.



DELAWARE CHILD PROTECTION REGISTRY CONSENT FORM Web Portal



Request must be within 90 days of signature date in order to be processed

PART I - APPLICANT INFORMATION
Name (Last*, First*, Middle):
Other Name(s) used:
Social Security #:
Date of Birth (mm/dd/yyyy)*:
Gender*:
Race:
Ethnicity: (Hispanic/Non-Hispanic)
Address (Street, City, State, Zip):
Are you on the Delaware Child Protection Registry for any substantiated cases of child abuse/neglect? Yes \(\substack No \)
If yes, explain:
I hereby authorize The Delaware Department of Services for Children, Youth and Their Families to provide the below named requeste with all substantiated cases of child abuse or neglect concerning me that are active on the Delaware Child Protection Registry. I further elease the Delaware Department of Services for Children, Youth and Their Families, its officers and employees from any and all claims arising out of or in any way connected to the release or dissemination of any information concerning me.
Signature:
Date:
Parent/Guardian Signature (If applicant is under the age of 18)
PART II - REQUESTER INFORMATION
Check one option below and complete required information*:
1. Agency Request – Agency Name*: Brandywine School District Agency ID #58 Agency Number ID #65492
2. Individual Request - Self
* Mandatory

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Fingerprint Service Code Form



Service Code is unique to your hiring/licensing agency. Do not use this code for another purpose.

Please bring one of the identification documents from the list below to your enrollment appointment. Identification must be valid, not expired, and contain a photograph of the applicant.

- Driver's License issued by a State or outlying possession of the U.S.
- Driver's License PERMIT issued by a State or outlying possession of the U.S.
- Driver's License PAPER/TEMPORARY issued by a State or outlying possession of the U.S.
- Enhanced Driver's License (EDL)
- Commercial Driver's License issued by a State or outlying possession of the U.S.
- Commercial Driver's License PERMIT issued by a State or outlying possession of the U.S
- > ID card issued by a federal, state, or local government agency or by a Territory of the United States
- > Enhanced Tribal Identification Card (for federally recognized U.S. tribes)
- > Department of Defense Common Access Card
- Uniformed Services Identification Card (Form DD-1172-2)
- U.S. Military Identification Card
- U.S. Coastguard Merchant Mariner Card
- Military Dependent's Identification Card
- U.S. Passport
- Foreign passport
- > Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
- Employment Authorization Card/Document (I-766) that contains a photograph
- Canadian Driver's License
- > Foreign Driver's License (Mexico and Canada Only)
- U.S. Visa issued by the U.S. Department of Consular Affairs for travel to or within, or residence within, the United States

Name Linking Documents (only needed if name on identification does not match name in registration):

 Original or Certified Copy of a Court Ordered Name Change Document (to include marriage certificates and divorce decrees)



Don't have access to the Internet? You can still schedule an appointment by calling 866.761.8069.

CBC Instructions (Volunteers):

As of 9/11/2023, the State of Delaware, in partnership with IdentoGO, has implemented a new procedure to complete Criminal Background Clearances. This has changed to an online scheduling process and includes additional locations throughout the State to obtain the required clearances. Volunteers must complete a Criminal Background Clearance before they are eligible to volunteer with the District. As stated in State regulations, a Criminal Background Check obtained under Delaware Regulations for school volunteers shall only be valid for 12 months if they wish to continue volunteering with BSD. The price has increased to \$38.00. A copy of the Payment Receipt obtained upon completion of the clearance must be returned with this packet. Copies of Criminal History will not be accepted.

How to Schedule an Appointment:

- 1. Visit https://uenroll.identogo.com/
- 2. Enter the Service Code specifically for Brandywine School District Volunteers: 27RY2Z
- 3. Click on "Schedule or Manage an Appointment"
- 4. Enter your Legal Name, Date of Birth, and Method of Contact A valid email address is required for this step. Once completed, click the "Next" arrow on the bottom right hand corner of the screen
- 5. Create a security question this is used in order to access your appointment information and results once they become available (i.e. What is your favorite color/food etc.)
- 6. Enter the answer to that question you created above. Once completed, click the "Next" arrow on the bottom right hand corner of the screen
- 7. Enter your country, city and state of birth and your country of Citizenship (if not a US Citizen, choose from the drop-down menu which selection applies to you). Once completed, click the "Next" arrow on the bottom right hand corner of the screen
- 8. Answer the 3 questions presented. Please note: The Service Code mentioned in Step 2 is NOT a Coupon Code used for a method of payment. This code is only used to identify you as a BSD Volunteer to ensure the results get directed to the District, so please answer "NO" for question 3. Once completed, click the "Next" arrow on the bottom right hand corner of the screen
- 9. Fill out your personal information to include the following:
 - Height & Weight
 - Hair & Eye Color
 - Preferred Language
 - Gender & Race
- 10. Fill in your current mailing address. Once completed, click the "Next" arrow on the bottom right hand corner of the screen
- 11. Choose the identification document you will bring with you to the appointment for IdentoGO staff to verify your identity. Be sure to bring the ID you indicated in the drop-down menu the day of your appointment. Once completed, click the "Next" arrow on the bottom right hand corner of the screen
- 12. Enter your zip code and search, the locations with available appointments will appear on the screen. Click the arrow on the location where you'd like to schedule your appointment, and click next. Once completed, click the Next arrow on the bottom right hand corner of the screen
- 13. Select a date from the first drop-down menu, and a time from the second drop-down menu
- 14. Click the blue Submit button to submit your enrollment
- 15. A service summary will appear on the screen that gives all of the details of your appointment including the \$38.00 fee, date, time, address, and acceptable forms of payment.

SAMPLE - VOLUNTEER

IdentoGO Center (1800000) 1 River Pl Wilmington, Delaware 19801-5125

Idento GO

Date

09/12/2023@09 36 AM

Customer* UE ID:

Services

DE - PUBLIC SCHOOL

\$38.00

VOLUNTEER -

BRANDYWINE DISTRICT

SubTotal*

\$38.00

Total:

\$38.00

Payment

\$38 00

Amount Paid:

\$38.00

Credit Card Authorization

By signing, I authorize IDEMIA and/or their agents to charge my credit card for service (s) performed and/or products purchased. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Signature

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

The FBI Privacy Act Statement can be found at https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement.

Applicant Notification of Procedures for Obtaining an Amendment to an FBI Record

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.