

VOLUNTEER BACKGROUND CHECK 2025-2026: PreK – 12th grade

Full Lega	ıl Name:		
· ·	Last Name	First Name	Middle Name
Other/M	laiden Name(s):		
Date of Birth:		Legal Gender:	
	WhiteBlack Other/Unknown	Asian/Pacific Islander	_American Indian/Alaskan Native
Have you	ı ever pleaded guilty or	been convicted of a felony in	a state or federal court?
Yes	No		
Have you	ı ever pleaded guilty or	been convicted of a misdeme	anor in a state or federal court?
Yes	No		
Are you	the subject of a current	t criminal investigation or hav	e pending charges against you?
Yes	No		
Address:			
City, Sta	te, Zip:		
Phone (H	I/C):	(W):	
	KCLH ck all that apply.	_ DISCOVERY EXPLO	ORER WMS WHS
 Signatur	e		Date

Your signature represents an acknowledgment that your statements are true and authorizes Williamston Community Schools to conduct a name-based background check through ICHAT.

• Completed forms can be submitted to Rachel Foster at fosterr@gowcs.net for processing. Please allow up to 5 business days for processing.

WCS Board Policy 9230 School Volunteers: The District may lawfully require a volunteer to complete an application and consent to a background check as described in Policy 5430.

WCS Board Policy 5430 Hiring and Background Checks (E): People who volunteer on a non-regular basis must undergo a criminal record check as mandated by the State of Michigan (I.C.H.A.T.) and a Public Sex Offenders Registry (PSOR) check.

Whenever a determination is made that the criminal history profile prevents an individual from serving as a volunteer, the superintendent of schools or designee will notify the individual and the sponsoring staff member prior to the student activity.

An individual's criminal history profile will be in effect and utilized for the current school year only.