VOLUNTEER RELEASE FORM

In order to ensure the protection of children in the care of Lake Orion Community Schools, all persons wishing to provide a volunteer service at the school or for any function conducted by the school must complete a State of Michigan Internet Criminal History Access Tool (ICHAT) background check. Any individual declining to complete the Volunteer Release Form will not be considered for volunteer service.

The information on this form must be complete and legible; otherwise, the background check will not be processed.

Please attach a copy of your current Michigan driver's license or Michigan state I.D. to this form and be sure to sign and date the bottom of this page. Return the form to your school office.

Volunteers are a vital part of the successful operation of our school system. Without volunteers, many of the school, classroom, and extracurricular activities could not exist or even happen. We thank all of those individuals who have and continue to devote their time and energy to making our schools an even better place by volunteering their time.

Lake Orion Community Schools reserves the right to approve or deny any volunteer service upon review of the background check returned. The determination will be based upon the individual's fitness to have responsibility for the safety and well-being of children. Providing false information or information contradicting the background check information is grounds for immediate volunteer denial.

As a volunteer, you must abide by all relevant Board of Education policies and administrative guidelines while volunteering for the District. Although volunteers are covered under the District's liability insurance policy, you are not covered by its health insurance policy nor are you eligible for workers' compensation. Should you become ill or suffer an accident while doing volunteer work for the District, you shall be responsible for any and all medical charges that may accrue. As a volunteer, you are not in any manner considered an employee of the District or entitled to any benefits provided to employees.

You must understand the procedures and policies that govern field trips for which you are volunteering to chaperone. The trip leader is responsible for the preparation and conduct of the trip and will provide chaperones with detailed information about the trip. Please obtain answers from the trip leader to any questions you have concerning the trip. The students on the trip are governed by the District's Code of Conduct, which prohibits inappropriate behavior. Your responsibility as a volunteer is not to invoke discipline on a student, except in cases of imminent threat to the student's or other people's safety or wellbeing. Report any student behavior problems to the trip leader immediately. Chaperones are required to model the behaviors expected of students at all times on the field trip. Inappropriate conduct on the part of a fellow chaperone or staff member must be reported to the trip leader as soon as possible.

VOLUNTEER RELEASE FORM

PLEASE PRINT THE REQUIRED INFORMATION AS IT APPEARS ON YOUR CURRENT MICHIGAN DRIVER'S LICENSE OR MICHIGAN STATE ID: (All fields are required for the State of Michigan background check)

*** YOUR SIGNATURE MUST MATCH YOUR ID ***

Please attach a copy of your current Michigan driver's license or Michigan state I.D. to this form and be sure to sign and date the bottom of this page. Return the form to your school office.

****The information on this form must be complete and legible; otherwise, the background check will not be processed****

VOLUNTEER INFORMATION (please print): ALL FIELDS MUST BE COMPLETED		
Last Name	**First Name**	**Middle Initial**
Maiden Name or Last Names Previously Used		
Phone #:	**Email:**	
Date of Birth (mm/dd/yyyy)	**Select Race:** Asian Black White Other	**Select Sex:** Female Male

VOLUNTEER SERVICE (please print): ALL FIELDS MUST BE COMPLETED

Student(s) Name	Grade Level	Volunteer Assignment	School Student Attends

By affixing your signature to this form, you acknowledge your statements to be true, understand the expectations for Lake Orion Community Schools volunteers, release the Board of Education from any and all liability for damages, whatever their nature, which may result as a consequence of your volunteer service and give full consent to complete the requested background check.

Signature of Volunteer Applicant: SIGNATURE MUST MATCH ID	Date

OFFICE USE ONLY		
Determination Approved Denied	Date	Determining Staff Member Initials