

Hamilton Heights School Corporation

Information on Volunteers

School Board Policy states that all volunteers who would have care, custody or control over students are required to have a criminal history background check. In order to do this we need the following information. Thank you in advance for your willingness to help our students learn and grow.

PLEASE PRINT

Name of Volunteer_____

Last Name

First Name

M.I.

Volunteer's Date of Birth_____ Sex F M Telephone_____

Mailing address_____

Relationship to the student_____

Race, *Circle one* White Black American Indian/Alaskan

Asian

Pacific Islander

Multiracial

Confidentiality Agreement: School volunteers will, on occasion, have access to private information about students. Failure to respect and maintain student privacy will result in the loss of volunteer status.

If you plan to volunteer in your child's classroom, help with classroom parties, go on a field trip with your child, etc., please complete this form and return it to the school office or your child's teacher. **Each individual planning to help at school must complete this form.**

Student's Name (First and Last)_____

Teacher Name_____ Room Number_____

September 23, 2011