



## ROCHESTER COMMUNITY SCHOOLS VOLUNTEER GUIDELINES AND ICHAT AUTHORIZATION FORM

## **Volunteer Guidelines**

Volunteers to the Rochester Community Schools may be used on a temporary basis to give support to a classroom or program. The following guidelines are to be used as volunteers are assigned to classrooms or programs:

- Volunteers are appreciated but should not be a distraction to the school environment.
- If a volunteer will be with students for a significant length of time without a RCS employee being present, or will be with students on a regular basis, that volunteer will be required to have a Michigan State Police Internet Criminal History Access Tool (I-CHAT) screening annually. The results of this I-CHAT criminal background check will remain confidential and will only be used by School District administration to determine if you have been convicted of an offense that would otherwise prohibit you from working in our schools.

## **I-CHAT AUTHORIZATION**

Please return this form to the Executive Assistant to the Asst. Superintendent for Business Affairs, 501 W. University, Rochester, MI 48307

School Year:	*School Building(s):	
Legal Last Name:	*Full Legal First Name:	<u>*</u> MI:
*Phone Number:	Alternate Phone Number:	
*Race: Indicate best option per ICHAT system cho	pices: ✔ Check one	
<ul><li>White</li><li>Black</li><li>Asian or Pacific Islander</li></ul>	<ul><li>American Indian or Alaskan Native</li><li>Unknown/Other</li></ul>	)
Gender: Male 🗆 Female 🗆	*Birth Date: / /	YYYY
Maiden Name:	*Other First Name:	*MI:_
Other Last Name:	*Other First Name:	*MI:_
*Reason for Background Check: 🗸 Chec	k all that apply	
<ul> <li>Band Boosters</li> <li>BASES Volunteer</li> <li>Classroom Volunteer</li> <li>Camp Chaperone</li> <li>Enrichment Volunteer</li> </ul>	<ul> <li>Field Trip Chaperone</li> <li>Student Teacher</li> <li>Summer Music Theatre</li> <li>Volunteer Coach / Assistant Coach</li> <li>Other:</li> </ul>	
, ,	approval for the Rochester Community Schools Human Find check against my records using the Michigan State Pol	
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Applicant Signature:	Date:	