

Name of Volunteer _____

Period of Time for which request is being made _____

Position for which services shall be rendered _____

Name of Teacher/Coach/Sponsor supervising class, activity, sport:

Address: _____

Phone Number: _____

Date of Birth (mandatory) _____

This request, upon approval, is good only for the current school year and must be resubmitted for subsequent school years.

I, _____, agree to the Miami-Yoder School District JT-60 conducting a criminal background check and any or all future requirements for the same. I also agree to conduct myself in a manner respectful of district policies and decorum.

Signed: _____ Date: _____

For Central Office Use Only:

Background Check Completed: _____

Date Completed: _____

Building Principal Reviewing Background Check: _____

Signature of Principal: _____

Date: _____

Reviewed by Superintendent: (Date) _____

Signature: _____

The Miami-Yoder School District JT-60 reserves the right to conduct background checks initially to determine eligibility and then randomly as requested by school administration to ensure and verify a safe, secure school environment.

ADOPTED: September 11, 2008