



Volunteer's Waiver of Liability and Release of Claims

In accordance with State law and district policy, any person who volunteers within the school district shall have a Criminal History Records Check conducted prior to participating in any program or activity.

I hereby authorize the Michigan Department of State Police to release any information it may have in its records or may obtain from other sources under my name and birth date to the **Jenison Public School Board of Education**, and I hereby release and forever discharge the State of Michigan and the Michigan Department of State Police and its agents, officers, and employees from any and all actions, causes or actions claims and demands for, upon or by reason of any damage, loss or injury, which may be sustained by me in the nature of libel, slander, invasion of privacy or other resulting from errors or omissions in the information given or from the use of the information, whether by reason of unauthorized use, negligence or otherwise.

Last (*please print*) First Middle

Address

City State Zip

Maiden Name / Other Names (*if applicable*) Date of Birth Male Female

- American Indian or Alaskan Native Native Hawaiian or Pacific Islander Black / African American
- White Asian American Hispanic / Latino

Please answer the following questions:

- Have you ever been convicted of a criminal offense? Yes No
- Do you have any felony charges pending against you? Yes No

If you answered yes to any of the above, please explain the circumstances on the reverse side of this form.

Please check the building(s) in which you plan to volunteer:

- High School Junior High Bauerwood Bursley ECC
- Pinewood Rosewood Sandy Hill JIA JCA

Signature

Date

Phone Number

Student/Child's Name (Please print)

**This background check will be good for one school year.

RETURN THIS FORM TO YOUR BUILDING SECRETARY