



# **School City of East Chicago**

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## **\*NOTICE OF REQUIRED CRIMINAL BACKGROUND CHECK\***

In compliance with local, state and federal regulations, you are hereby notified that a background check and a nationwide criminal background check will be made of you in the processing of your application to volunteer with the School City of East Chicago. In order to complete this check you are required to provide the following:

1. Valid identification document containing your name, address, and date of birth;
2. Statement that you have not been convicted of a crime; or
3. If you have been convicted of a crime, a statement describing the crime and the particulars of the conviction.

As part of the background check, you are hereby advised that you are entitled as follows:

1. To obtain a copy of any background check report;
2. To challenge the accuracy and completeness of any information contained in any such report and obtain a prompt determination as to the validity of such challenge before a final determination to allow you to volunteer is made by the School City of East Chicago.
3. Prior to the completion of the background check, the School City of East Chicago may choose not to utilize your services.
4. The School City of East Chicago, upon receipt of a background check report lacking disposition data, shall conduct research in whatever State and Local recordkeeping systems available in order to obtain complete data;
5. The law enforcement agency providing any background information shall make a determination whether you have been convicted of, or are under pending indictment of a crime that bears upon your fitness to have responsibility for the safety and well-being of children, the elderly, or individuals with disabilities and shall convey that determination to the School City of East Chicago; and
6. Any background check and the results thereof; shall be handled in accordance with the requirements of Public Law 92-544 as it applies to the School City of East Chicago.

By my signature below, I acknowledge receipt of a copy of this Notice of Required Criminal Background Check.

\_\_\_\_\_  
DATE

D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_

SS#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME

Telephone #: \_\_\_\_\_

## VOLUNTEERS

The Board recognizes that certain programs and activities can be enhanced through the use of volunteers who have particular knowledge or skills that will be helpful to members of the staff responsible for the conduct of those programs and activities.

The Superintendent shall be responsible for recruiting community volunteers, reviewing their capabilities, and making appropriate placements. The Superintendent shall not be obligated to make use of volunteers whose abilities are not in accord with Corporation needs. Each volunteer who is in direct contact with students will be required to submit a Limited Criminal History Record Check.

The Superintendent is to inform each volunteer that s/he:

- A. will agree to abide by all Board policies and Corporation guidelines while on duty as a volunteer;
- B. will be covered under the Corporation's liability policy but the Corporation shall not provide any type of health insurance to cover illness or accident incurred while serving as a volunteer, nor is the volunteer eligible for worker's compensation;
- C. will be asked to sign a form releasing the Corporation of any obligation should the volunteer become ill or receive an injury as a result of his/her volunteer services;
- D. will be required to report any personal arrests on the filing of criminal charges while serving as a volunteer.
- E. will be required to report any substantiated report of child abuse or neglect of which s/he is the subject

The Superintendent shall also ensure that each volunteer is properly informed of the Corporation's appreciation for his/her time and efforts in assisting the operation of the schools.

I have read the above SCEC Volunteer Policy agree to abide by the above policy.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

I.C. 5-2-22  
I.C. 10-13-3  
I.C. 20-26-2-1.3  
I.C. 30-26-2-1.5  
I.C. 20-26-5-10, -11 and 11.5

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# **School City of East Chicago**

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## **New & Returning Volunteer Release Form**

I have offered my services as a volunteer to help the School Corporation in the following areas:

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I agree to abide by all relevant School Board policies and administrative guidelines while on duty for the Corporation. I understand that, although I am covered under the Corporation's liability insurance policy, I am not covered by its health insurance policy nor am I eligible for workers' compensation. Should I become ill or suffer an accident while doing volunteer work for the Corporation, I agree that I shall be responsible for any and all hospital and medical charges that may accrue.

I understand further that, as a volunteer, I am not in any manner considered an employee of the Corporation or entitled to any benefits provided to employees. I further release the Board from any and all liability for any damages, whatever their nature, which may result as a consequence of my volunteer services.

For the protection of the children in the school, the Corporation is required by law to inquire of its volunteers members whether or not they have ever been convicted of a crime related to children. We would appreciate your cooperation by indicating that you have never been convicted of any of the following offenses: aggravated murder, murder, voluntary manslaughter, involuntary manslaughter, felonious assault, aggravated assault, assault, aggravated menacing, abuse or neglect of a child, kidnapping, abduction, child stealing, criminal child enticement, rape, sexual battery, corruption of a minor, gross sexual imposition, importuning, voyeurism, public indecency, felonious sexual penetration, compelling prostitution, promoting prostitution, procuring prostitution, disseminating matter harmful to juveniles, pandering obscenity, pandering obscenity involving a minor, pandering sexually-oriented matter involving a minor, illegal use of a minor in nudity-oriented material or performance, endangering children, contributing to the delinquency of children, carrying concealed weapons, improperly discharging a firearm at or into a school or house, corrupting another with drugs, placing harmful objects in or adulterating food or confection.

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Volunteer

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Parent Liaison

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Date

# **School City of East Chicago**

## **Volunteer Confidentiality and Discrimination Statement**

I understand that information regarding students, families, staff, and the organization may be confidential in nature and that as a volunteer for the East Chicago Public Schools I will...

- Sign in and out at designated area.
- Wear badge to identify as a volunteer during volunteer activity or experience.
- Be willing to assist classroom teachers and others at the school.
- Be friendly, cooperative, and professional in all activities and dealing with all people.
- Respect the confidential nature of any verbal or written communication I receive regarding students, families, staff, and the organization.
- Not criticize the teacher, principal, or school – be supportive.
- Not visit other classrooms, teachers, students or school areas I have not been assigned to.
- Keep personal information confidential at school and after I leave school.
- Be discreet in any verbal communication by not discussing students, staff, or families in front of others.
- Immediately report directly to the principal or site administrator any information disclosed to me concerning a child's safety.
- Make reasonable efforts to assure that each student is protected from harassment or discrimination.
- Not harass nor discriminate against any student, staff member or volunteer on the basis of race, color, religion, sex, age, national. or ethnic origin, political beliefs, marital status, handicapping condition, sexual orientation, or social and family background.
- Report my hours to the parent liaison at your school.
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I also understand that relationships developed with children at school should remain at school and that for the protection of the student, staff and volunteer, I will not be alone with a child that is out of view of school personnel or another adult volunteer.

Volunteer Signature \_\_\_\_\_

Date: \_\_\_\_\_

**AFFIDAVIT AFFIRMING  
NO CHANGE IN CRIMINAL RECORD**

I hereby affirm that there has been no change in my criminal record from last year. That I have not been charged with or convicted of any of the following offenses: aggravated murder, murder, voluntary manslaughter, involuntary manslaughter, felonious assault, aggravated assault, assault, aggravated menacing, abuse or neglect of a child, kidnapping, abduction, child stealing, criminal child enticement, rape, sexual battery, corruption of a minor, gross sexual imposition, importuning, voyeurism, public indecency, felonious sexual penetration, compelling prostitution, promoting prostitution, procuring prostitution, disseminating matter harmful to juveniles, pandering obscenity, pandering obscenity involving a minor, pandering sexually-oriented matter involving a minor, illegal use of a minor in nudity-oriented material or performance, endangering children, contributing to the delinquency of children, carrying concealed weapons, improperly discharging a firearm at or into a school or house, corrupting another with drugs, placing harmful objects in or adulterating food or confection.

I understand for the protection of the children in the school, the Corporation is required by law to inquire of its volunteers members whether or not they have ever been convicted of a crime related to children.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.  
Executed at East Chicago, Indiana on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

I have attended the mandatory orientation on the above date and understand and accept the terms.

\_\_\_\_\_  
Volunteer Name (Print)

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Liaison (Print)

\_\_\_\_\_  
Parent Liaison Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Site

<b>VOLUNTEER INFORMATION</b>	
_____ Telephone Number	_____ Address
	_____ City, State and Zip Code

**(NOTE:** Please notify the Parent Liaison of your school of any change in your status or information after the signature date)