HORIZON ELEMENTARY SCHOOL
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Plymouth, Wisconsin 53073
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PLYMOUTH
JOINT SCHOOL DISTRICT

Todd Hunt
Principal
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VOLUNTEER REGISTRATION FORM

It is the policy of the Plymouth Joint School District to conduct criminal background checks on persons seeking to serve as volunteers within the School District. Information on date of birth and social security number is confidential and will be used solely for the purpose of confirming the identity of volunteer applicants, and for no other purpose. All information, requested below, must be provided.

PERSONAL INFORMATION

1. Name: _____
First Middle Last

2. Current Address: _____
Street Address City State Zip

3. Telephone Numbers: Home: ( ) _____ Work: ( ) _____

4. Social Security Number: _____ - _____ - _____

5. Drivers License Number: _____ Issuing State: _____

6. Date of Birth: _____/_____/_____
Month / Day / Year

7. Maiden name or other names used: _____

I consent and authorize the Plymouth Joint School District to contact the Wisconsin Department of Justice (Criminal Information Bureau), as well as any other local or state law enforcement agency, to investigate and report my criminal offense record, if any, using all of the information set forth above. I understand that any report or document provided by an investigative agency may be reviewed by officials and agents of the Plymouth Joint School District having a need to know. I also authorize the School District to obtain any and all information resulting from any background checks or investigations conducted by the Wisconsin Department of Public Instruction. I understand that I will not be approved to serve as a School District volunteer until the background investigation has been completed. This consent shall be interpreted liberally in favor of School District access to information.

I certify that the information provided above is true and correct without omissions of any kind. I understand that false statements or omissions will be cause for my rejection or subsequent dismissal as a volunteer. I agree that the School District shall not be held liable in any respect if my volunteer service is denied or terminated because of false statements provided, or omissions made by me on this form. In consideration of review of my volunteer service application, I hereby release and agree to hold harmless the Plymouth Joint School District from all claims, liability, damages and costs of any type, arising from or related to the criminal background investigation to be conducted, as well as from disclosure of the information, set forth above, to investigative agencies.

_____ _____
Signature Date

The Plymouth Joint School District is an equal opportunity employer and does not discriminate against volunteer applicants on the basis of race, creed, sex, national origin, disability, age, or on any other unlawful basis.