



## Rogers City Area Schools

## ICHAT Volunteer Release of Information Form

The purpose of this form is to notify you, in accordance with present federal law, that a background check including a criminal records check, will be obtained on you in the course of your volunteer work with students in the Rogers City Area School District.

The background check is based on individual identifiers, and run through the State of Michigan ICHAT system.

Determination of fitness to volunteer will be the responsibility of the Superintendent's Office. Providing false information, incomplete information, or information that contradicts the results of the background check are grounds for denial of the privilege of volunteering.

By providing your driver's license (or state ID card) and signing this form you acknowledge your statements to be true and give full consent for RCAS to complete a background check through ICHAT.

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

Legal First and Last Name: \_\_\_\_\_

Maiden/Alias Names: \_\_\_\_\_ Race: \_\_\_\_\_

Email Address: \_\_\_\_\_ Gender: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Have you ever been convicted or plead guilty/no contest to a crime? ☐ Yes ☐ NO

If yes, describe: \_\_\_\_\_

Would you like your contact information shared with: ☐ PTO ☐ Sports Boosters ☐ District Clubs  
☐ My child(ren)'s teachers ☐ Any group needing helpers

Name of child(ren) in the District: \_\_\_\_\_

Event(s) and buildings(s) in which you'll volunteer:

This form should be completed ANNUALLY with your ID, in the presence of any RCAS building secretary. Please call 989.734.9101 with any questions or concerns.

Copy of Driver's License Here