

Union Grove Elementary School Int. District #1

1745 Milldrum Street, Union Grove, WI 53182 • 262-878-2015 • www.uges.k12.wi.us

CRIMINAL BACKGROUND CHECK CONSENT FORM

This form will be sent to the State of Wisconsin Department of Justice to check for any misdemeanors, felonies, conviction, etc.

Union Grove Elementary School District welcomes and appreciates all of the help and support of our many volunteers who assist our students and staff. In an effort to ensure the safety of our students, staff, and visitors; a background check is required. The district will run a criminal record check for convictions and pending charges through the Wisconsin Department of Justice Online Record Check System. Background checks will be considered in determining if a volunteer application will be accepted.

Please be aware that completing the **Request for Criminal History Record Check** is no guarantee that your volunteer services will be needed. You will be contacted by the cooperating Union Grove Elementary staff member in charge of an activity and/or field trip with information pertaining to the event.

All candidates desiring to be a volunteer must be a guardian or an emergency contact and complete the entire form.

Please **PRINT CLEARLY**.

Full Legal Name: _____

Gender: ☐ Male ☐ Female **Date of Birth:** _____

Race: ☐ White ☐ Black ☐ Asian/Pacific Islander ☐ American Indian/Alaskan Native ☐ Unknown

Social Security (optional): _____

Other names: (Maiden, Aliases, etc.) _____

Have you ever been convicted or pled no contest of a crime involving a minor? ☐ YES ☐ NO

Other than a traffic violation, have you ever been convicted of a felony or misdemeanor? ☐ YES ☐ NO

If YES, to either question above, please explain.

I certify to the best of my knowledge that all information provided is true and correct. I understand that misrepresentations or omissions may be a cause for rejection. I understand that Union Grove Elementary School will review my background, verify information and conduct a criminal background check at no expense to me. I authorize any government agency, its officers, employees and agents to release any and all information regarding my criminal history to Union Grove Elementary School Int. District #1. I understand that the District reserves the right to deny my application and that the opportunity to volunteer will depend upon the results of the criminal background check.

Signature _____ **Date** _____ **Phone #** _____

Names of Student(s)

Relationship to Student(s)

_____	_____
_____	_____
_____	_____

District Use Only

District initial of approval: _____ Date _____

Requires Administrator Investigation? ☐ YES ☐ NO

Administration approval? ☐ YES ☐ NO