



Student Name _____

Home Elementary School _____

FORM EG-4106-A

Independent School District No. 621
350 Highway 96 West • Shoreview • MN • 55126 • Phone 651-639-6020 • Fax 651-639-6033

VOLUNTEER CRIMINAL BACKGROUND CHECK

SCHOOL COMPLETES THIS SECTION

Date: _____

The following named individual has made application to volunteer at Pike Lake Education Center and home elementary school of Mounds View Schools. (school)

The program he/she is volunteering for is: Kindergarten and Elementary school (general school and classroom help and/or field trips)

VOLUNTEER COMPLETES THIS SECTION ---- PLEASE PRINT CLEARLY

Full name of volunteer: _____
Last First Middle (not maiden)

Maiden, Previous, Alias: _____

Date of Birth: _____

Required: I have attached a copy of my driver's license or government issued photo ID to aid in this process.

I authorize the Minnesota Bureau of Criminal Apprehension to disclose my criminal history record information to Mounds View Schools pursuant to Minnesota State Statue 123B.03 for the purpose of volunteering with this agency.

The expiration of this authorization shall be for a period no longer than one year from the date of my signature.

Signature of applicant

Date

Revised: 3-8-06 (address change only)

OVER

District Bullying and Harassment Policy may be found at:

<http://www.moundsviewschools.org/domain/1700>

Or by going to: moundsviewschools.org and selecting the following options:

- Schools
- Kindergarten
- Kindergarten at Pike Lake Education Center
- Parent Resources
- District Bullying & Harassment Policy

Or by visiting the Kindergarten office at Pike Lake Education Center.

Harassment and Bullying	
<p>I, _____, as an employee/volunteer of Mounds View Public Schools have been provided a copy of EG-3104 regarding Harassment and Bullying.</p>	
<p>I have had an opportunity to read the policy and regulation and understand that I will be responsible for enforcement of the policy and regulation as I perform my duties as an employee/volunteer with the district.</p>	
<p>_____</p> <p>Name/Signature</p>	<p>_____</p> <p>Date</p>

I am available to volunteer for schoolwide events (picture day, vision and hearing screening, etc)

Email: _____

Phone: _____