

REDFORD UNION SCHOOLS, DISTRICT NO. 1

17715 Brady Street, Redford Twp., Michigan 48240 Telephone (313) 242-6000 | Fax (313) 242-6025

Website: www.redfordu.k12.mi.us

Dear Volunteer,

Thank you very much for volunteering in the Redford Union School District. We appreciate your time and effort in supporting the children of our district.

In accordance with the Michigan School Safety Legislation, our Board of Education is requiring that we perform criminal records check through the Michigan State Police ICHAT System on all volunteers who accompany and supervise students on field trips or who directly volunteer to work with students on a regular and continuous basis.

The attached two-page form needs to be completed for this process. This information will be kept strictly confidential in our Human Resources Department.

Again, we thank you for your time in supporting Redford Union Schools. Volunteers play a critical role in the success of our district.

Sincerely,

Amanda Marable Human Resources Coordinator Redford Union Schools

REDFORD UNION SCHOOLS

VOLUNTEER

CRIMINAL RECORD INFORMATION

I understand that this information is required by Michigan Statute and the Redford Union School District as part of the screening process for volunteers. The personal information on this sheet is required in order to check status through the ICHAT system with the Michigan State Police.

PLEASE PRINT:

Volunteer Location	on/School				
(Describe the actistudents. For exa	ivity and duration ample: field trip, or	in which the volun	teer will be w special projec	orking with the supervising t, part of community service	
Last	Fir	rst		Maiden/Previous	
Date of Birth		Male	Female	_	
ETHNICITY -	(PLEASE CHEC	K)			
(1)	American Indian/	Alaskan Native			
(2)	White				
(3)	Black				
(4)	Asian/Pacific Isla	nder			
(5)	Hispanic/Latino				
Student's Name			· · · · · · · · · · · · · · · · · · ·		
Signature			Date		
I also have childs	en attending other	schools in the dist	rict:		
Name of child			School attending		
Name of child			School attending		
Name of child			School attending		

REDFORD UNION SCHOOLS PART II CONDITIONAL STATEMENT

Last		First	<u>M/I</u>	Maiden/Previous		
Pursu	ant to 1993 Public	Act 68, 1 and Public Act 83	of 1995, represed	nt that: (Check One)		
	_ 1. I have NOT	BEEN CONVICTED of, or 1	pled guilty to any	y crimes.		
		EN CONVICTED of or PLE ate sheet to explain the nature				
	AVVV					
I unde	erstand and agree	that pursuant to 1993 Public A	Act 68 and Publi	c Act 83 of 1995:		
1.		ucation may request a crimin ystem, which is dependent up		on me from the Michigan State olunteer services I perform;		
2.	Until that report volunteer; and	is received and reviewed by t	he District, I am	regarded as a conditional		
3.	3. If the report received from the Michigan State Police ICHAT System is not the same as my representation(s) above respecting either the absence of any conviction(s) or and crime(s) of which I have been convicted and upon further review by the Human Resources Department, my ability to volunteer may be voidable at the option of the District.					
Signa	ture		Date			