Surry County Schools
Volunteer Request for Criminal Background Check
Policy (5015-P School Volunteers)

Requesting School:_____ Date: _____

Volunteer Name:_____
First Full Middle Last Maiden

Volunteer Level: One_____ Two _____ Three _____ Four _____ *Coach _____ Driver _____
Required NCHSAA Affirmation

List any other names used in the past: _____

Social Security # _____ - _____ - _____ Date of Birth: _____ _____ _____
Month Day Year

Driver's License #: _____ State _____

Present Address: _____
Street City State

Record of past address for last 10 years (use back of page if necessary)

From _____ to _____ _____
Year Year Street Address City State

From _____ to _____ _____
Year Year Street Address City State

From _____ to _____ _____
Year Year Street Address City State

***Please list any felony or misdemeanor criminal convictions, guilty pleas, deferred prosecutions, prayer for judgments and pending charges. (Excluding minor traffic violations)**

_____

_____

_____

I certify that all of the foregoing is complete, accurate and true and I agree to notify the district of any change in the foregoing information. Further, I certify that I have never been convicted of criminal behavior which includes either an act of violence or of a sexual nature. I hereby authorize the Surry County Board of Education, its designated employees or agents to secure any and all information on my background and direct the holders of any and all such information about me to release it to the Surry County Board of Education, its designees and agents. I hereby expressly waive any claims against the holders of any such information for their compliance with the directive.

_____
Signature of prospective volunteer Date

***I have reviewed and approve the above listed volunteer request for my school.**

Principal _____ School _____

Note: Please allow up to 30 days for these forms to be processed and returned to the school.

For office use only: _____ Approved to Volunteer _____Deny as Volunteer

By: _____ Date:_____