

Volunteer name (*please print*) _____

Volunteer signature _____

Date _____

For School Use Only

General description of assignment(s):

- ☐ Supervising students as needed by a teacher
- ☐ Supervising students during a regularly scheduled activity
- ☐ Assisting with academic programs
- ☐ Assisting at the resource center or main office
- ☐ Other _____

Name of supervising staff member _____

Illinois Sex Offender Database Registry, www.isp.state.il.us/sor/

Registry checked by: _____ Date: _____ (*mandatory*)

Illinois Murderer and Violent Offender Against Youth Registry, www.isp.state.il.us/cmvo/

Registry checked by: _____ Date: _____ (*mandatory*)

Dru Sjodin National Sex Offender Public Website (NSOPW), www.nsopr.gov

NSOPW checked by: _____ Date: _____ (*mandatory*)

To be completed by the Building Principal:

Will the individual be working over a long period of time in direct contact with students where no staff member is continuously present or in other situations where a fingerprint-based criminal history records check would be prudent? ☐ Yes ☐ No

If yes, and provided the individual authorized the fingerprint-based criminal history records check, please provide the following:

Date that the background check was requested _____

Date that the background check was received and reviewed _____

Check reviewed by (*please print*) _____

Signature of reviewer _____

Date _____