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Janet L. Keeling
Assistant Superintendent
Elementary Instruction

Dear Volunteers:

The Troy School District values the people who volunteer in our classrooms and schools. You provide critical support that enhances the learning and success of our students. The district appreciates your desire to share your time and talents with its students.

The School Safety Initiative, signed into law, requires districts to obtain criminal history checks for all employees. The Troy School District also requires background checks for **all volunteers who drive on field trips or work with students without the direct supervision and presence of a classroom teacher or TSD/TSS employee.** This includes parents, grandparents, aunts, uncles, any family members over the age of 14, Troy School District and TSS employees, and other community member volunteers. Once cleared by our Human Resource Department, you will be permitted to volunteer in this capacity at any level (elementary, middle or high school) for one school year; therefore, be sure to list all of the schools your child(ren) attend on the form below.

Please return the completed form to your building principal. **All information will be treated confidentially and will be used only for the purposes stated above.** To safeguard the information you are providing, please return this form (*entire page please*) directly to the school office. Please note that a parent signature is required for volunteers under the age of 18. **Also note that all requested information represents required fields in the ICHAT system.**

If you have any questions or concerns, please contact your building principal.

Sincerely,

Janet L. Keeling
Assistant Superintendent-Elementary Instruction

**Please do not tear off information
below - submit entire page when complete.**

VOLUNTEER BACKGROUND CHECK FORM (Please complete the information below)

As a prospective volunteer of the Troy School District, I understand that it is the school district's procedure to secure Criminal Conviction History information as part of their screening process using the information provided below:

Please Print

Elementary SCHOOL: _____ **Middle SCHOOL:** _____ **High SCHOOL:** _____

Parent/Volunteer Name: _____
Last First Middle

Previous Last Name(s): _____ **Daytime Number:** _____

Race*: _____ **Sex:** _____ **Date of Birth:** _____ **Student name(s):** _____

*(Race options: White, Black, Asian or Pacific Islander, American Indian or Alaskan Native, or Other)

Have you pled no contest to, or been convicted of, a misdemeanor/felony or are misdemeanor/felony charges currently pending against you?

_____ **YES** _____ **NO**

If yes, please describe the nature of the offense(s) including dates. _____

Student Signature (if volunteer is under age 18): _____ **Date:** _____

Parent Signature: _____ **Date:** _____