updated 7/30/2024

Volunteer's Waiver of Liability and Release of Claims

In accordance with State law & district policy, any person who volunteers within the school district shall have a *Criminal History Records Check* conducted prior to participating in any program or activity.

I hereby authorize the Michigan Department of State Police ("MSP") to release any information it may have in its records or may obtain from other sources under my name & birth date to the **Jenison Public School Board of Education**, and I hereby release & forever discharge the State of Michigan & the Michigan Department of State Police & its agents, officers, & employees from any & all actions, causes or actions claims & demands for, upon or by reason of any damage, loss or injury, which may be sustained by me in the nature of libel, slander, invasion of privacy or other resulting from errors or omissions in the information given or from the use of the information, whether by reason of unauthorized use, negligence or otherwise.

_____

Last Name *(please print)* First Name Middle Name

_____

Address

_____

City State Zip Code

_____ _____

Maiden / Other Names *(if applicable)* *email address*

_____ _____ _____

Birth date Sex Driver's License Number

ETHNIC BACKGROUND: SELECT ONE

- ❑ American Indian or Alaskan Native
- ❑ Asian or Pacific Islander
- ❑ White
- ❑ Black
- ❑ Unknown/Other

Please answer the following questions:

Have you ever pled guilty or been convicted of a criminal offense in a state or federal court? _____Yes _____No

Are you the subject of a current criminal investigation or have pending (felony or otherwise) charges against you? _____Yes _____ No

If you answered yes to any of the above, please explain the circumstances . Use the reverse side if needed.

JPS reserves the right to "approve" or "deny" any individual upon review of the background check from the MSP. Providing false information is grounds for immediate denial.

_____ _____

Signature **Date**

_____ _____

Phone Number **Student/Child's Name and Building and Teacher or Program/Group (please print)**

****This form, along with the background check is valid for one school year**. Record of this waiver and the background report will be kept in the personnel office for the life of the report. If you have any questions regarding this form, please call the Jenison Public Schools Human resources office at 616-457-8890.