THE SCHOOL DISTRICT OF TORRINGTON, CONNECTICUT

INFORMATION, ACKNOWLEDGEMENTS, CONSENT, AND RELEASE PACKET FOR SCHOOL VOLUNTEERS

A volunteer must complete one form each school year. All information must be provided including your full name and date of birth. Please print clearly and sign on the signature line.

Personal Information	
Name:	
Home Phone:	Work Phone:
Cell Phone:	<u> </u>
Date of Birth//	
Address:	
E-Mail Address:	
Personal Physician:	Phone:
Emergency Adult Contact:	Phone:
approximate dates and location:	
Names of children and/or wards at	ttending this school:
Signature:	Date:

Volunteer Background Information

<u>Directions:</u> Consistent with Torrington Board of Education Policy #7025 (School Volunteers, Student Interns and Other Non-Employees) and its accompanying Administrative Regulations, any prospective volunteer with the Torrington Public Schools who will perform a service involving direct contact with students may be asked to provide the information requested below and to submit to certain background checks and screenings before such person begins volunteering. Please complete this form and return it to the Human Resources Office promptly so that your volunteer application may be processed.

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Have you ever been convicted of a crime (answer "no" if you have been the subject of any arrest, criminal charge, or conviction, the records of which have been erased pursuant to Sections $46b-146$, $54-76$ or $54-142$ a of the Connecticut General Statutes ¹)? (YES) (NO).
Are any criminal charges pending against you as of the date you are completing this application? (YES) (NO). If you answered "yes" to this question, please state the charges and the court in which such charges are pending:
I understand that the information provided above will not necessarily result in the rejection of my application to serve as a volunteer with the Torrington Public Schools, but that the nature of the information will be considered as it relates to the performance of the services in question and in light of the requirements of state and federal law.
By signing below, I am affirming that the information provided above is true and correct. I understand that the falsification or omission of any information on this form may be grounds for the Superintendent or designee to prohibit me from becoming a volunteer with the Torrington Public Schools.
Signature: Date:

 $^{^1}$ Criminal records subject to erasure pursuant to Sections 46b-146, 54-76 \boldsymbol{o} or 54-142a of the Connecticut General Statutes are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolled, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon. Any person whose criminal records have been erased pursuant to Sections 46b-146, 54-76 \boldsymbol{o} or 54-142a of the Connecticut General Statutes shall be deemed to have never been arrested within the meaning of the Connecticut General Statutes with respect to the proceedings so erased and may so swear under oath.

Volunteer Acknowledgments, Consent, and Release

I hereby acknowledge, understand, and agree that:

- I have read, understood, and accept Torrington Board of Education Policy #7025 (School Volunteers, Student Interns and Other Non-Employees) and its accompanying Administrative Regulations.
- The Torrington Board of Education may require that I submit to a records check of the Department of Children and Families child abuse and neglect registry (the "DCF Registry") established pursuant to Section 17a-101k of the Connecticut General Statutes within 10 days of my application and/or request to volunteer with the Torrington Public Schools and before I perform a service involving direct contact with students.
- The Torrington Board of Education may require that I submit to a background check and/or screening performed by a third-party vendor within 10 days of my application and/or request to volunteer with the Torrington Public Schools. The Torrington Board of Education currently contracts with the Background Investigation Bureau, LLC (BIB) for this purpose.
- FAIR CREDIT REPORTING ACT DISCLOSURE: The Torrington Board of Education may obtain a "consumer report" from a "consumer reporting agency" as part of its background check and/or screening of me. These terms are defined in the Fair Credit Reporting Act (FCRA), which applies to me. A consumer report includes information regarding such issues as my credit standing, criminal record, motor vehicle record, character, and general reputation.

If the Torrington Board of Education obtains a "consumer report" about me and if the Torrington Board of Education considers any information in the "consumer report" when making a decision that directly and adversely affects me, I will be provided with a copy of the report before the decision is finalized. I may also contact "consumer reports" and the "consumer reporting agencies" that prepare these reports.

- The Torrington Board of Education is not collecting financial information in connection with any volunteer background check.
- All results of any records checks and background screenings described herein and required by the Torrington Board of Education must be received by the Human Resources Office before I may commence my volunteer services. The Torrington Board of Education will pay the cost of any such records checks and background screenings.

- No person who is required to register as a sex offender under state or federal law, or whose name is currently listed on the DCF Registry, may volunteer in the Torrington Public Schools.
- The Torrington Board of Education, acting through the appropriate building administrator or his/her designee, reserves the right to discontinue or disallow the services of any volunteer at any time at the discretion of the administration.

I hereby provide the following authorizations:

- I hereby authorize the investigation of all statements contained in this application as may be necessary in arriving at a decision regarding my application to serve as a volunteer with the Torrington Public Schools. By signing below, I hereby voluntarily authorize the Torrington Board of Education, its affiliates, successors, and assigns and its or their officials, agents, and employees to conduct a background check, including obtaining any criminal, civil, or administrative records (including, without limitation, records of or relating to the DCF Registry), motor vehicle records, employment records, educational, licensing, or regulatory records, and information about my character and general reputation, and to consider the information provided by the background check when decisions regarding my application to serve as a volunteer with the Torrington Public Schools.
- I hereby authorize the Background Investigation Bureau, LLC (BIB), as directed by the Torrington Board of Education, the right to make a thorough investigation of my past, including but not limited to a criminal record check, driving history, education, work history, character, and general reputation for the purpose of my eligibility to serve as a volunteer and/or continued service as a volunteer with the Torrington Public schools. Accordingly, I authorize and instruct any credit bureau contact to furnish any credit information concerning me to agents, investigators, or authorized representatives of BIB for their exclusive use. I authorize that a photocopy of this statement be accepted with the same authority as the original, and specifically waive any written notice from any person, agency, or employer contact.
- I hereby authorize the Torrington Board of Education and BIB to contact friends or associates with whom I am acquainted or who may have knowledge of me. I also authorize my former employers and agencies or entities with whom I have previously volunteered to give any information regarding my employment or volunteer service, together with any information that they may have regarding me, whether or not it is in their records. I also authorize any police, regulatory, or other agency (including, without limitation, the Department of Children and Families) to release to representatives of the Torrington Board of Education and BIB any information pertaining to me.

• I fully and voluntarily authorize the Torrington Board of Education and BIB to conduct this background investigation.

I hereby release the Torrington Board of Education, its affiliates, successors, and assigns and its or their officials, agents, and employees and the providers of any information or records described above (including, without limitation, the Department of Children and Families, BIB, my former employers, and agencies or entities with whom I have previously volunteers) from any and all liability for damage of whatever kind which may at any time result to me, my heirs, or assigns, because of compliance with this authorization, the conduct of this investigation, and release of information or any attempt to comply with it. A photocopy or facsimile of this authorization may be accepted in lieu of the original.

Signature:	 Date:	
Signature:	 Date:	