2018/2019 Volunteer Application/Criminal History Record Information Request Form

The Terrell Independent School District is required by Texas Education Code Chapter 22, Subchapter C to review the criminal history of applicants, employees, independent contractors, student teachers, and certain volunteers. The information requested below is necessary to obtain criminal history record information.

To ensure that TISD obtains criminal history record information that pertains to you and not to another person with the same or a similar name, please provide the information requested below. Any demographic information that you provide, such as sex, ethnicity, and age, will **NOT** be used to determine eligibility for employment or continued employment, but will be used solely for the purpose of obtaining criminal history record information. Please complete all of the requested information.

You must resubmit your application packet each school year on or after August 1.

(Please print or type)

PERSONAL DATA

Last	First	Middle	e
Maiden or other names used			
Street		City	Zip
Email (required)			
Social Security Number		Date of Birth (REQUIRED)	
Sex: □ Male □ Female	Ethnicity: Am. Indian	Asian □ Black □ Hispanic	□ White/Other
Driver's License #	Issuing State		
Home Phone	Work	« Phone	

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PERSON(S) TO CONTACT IN CASE OF AN EMERGENCY:

Name	Address	Phone				
Name	Address	Phone				
YOUR CHILD(S) NAME: (if applicable)						
Name:	Grade: Campus:					
Name:	Grade: Campus:					
Name:	Grade: Campus:					
Name:	Grade: Campus:					
Please indicate the campus/car	npuses where you would like to serve:					
□ WHB (Pre-K)	□ FMS (6 th -8 th)					
\Box GWE (K-5th)	\Box THS (9 th -12 th)					
\Box JWL (K-5th)	□ TAEC/Phoenix					
\Box WES (K-5th)	□ Other					
- E-CEL W-1	- E-CEL D.f.					
ExCEL VolunteerExCEL Coach	□ ExCEL Referee□ ExCEL Summer Academy					
□ ExCEL Coach □ ExCEL Fitness Ce						
Please indicate the days and hours you can serve:						
□ Mondav □ Morr	ning □ Afternoon □ All Day					
	ning \square Afternoon \square All Day					
□ Wednesday □ Morr						
□ Thursday □ Morr	ning □ Afternoon □ All Day					
□ Friday □ Morr	-					
□ Everyday □ Morr	ning □ Afternoon □ All Day					
NOTES OR OTHER SPECIAL SKILLS:						

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The following are my responses to questions about my criminal record history (if any) with descriptions to any questions with a yes answer:

If ye	s, please provide an explanation below:
	e you ever received deferred adjudication or similar disposition for any fee, or municipal criminal offense? yes no
If ye	s, please provide an explanation below:
	e you ever received probation or community supervision for any federal, s nunicipal criminal offense? yes no
If ye	s, please provide an explanation below:
	e you ever been convicted of any criminal offense in a country other than the states? yes no
If ye	s, please provide an explanation below:
	f the date of this authorization, do you have any pending criminal charges nst you? □ yes □ no
	s, please provide an explanation below:

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THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES RESIDENCE FOR THE PAST 7 YEARS. YOU MUST BE SPECIFIC ABOUT DATES OF RESIDENCE.

City/Town	County	State	Dates
I HEREBY CERTIFY T	HAT ALL INFORM	ATION PROVID	ED IN THIS AUTORIZATION IS
			AT IF ANY INFORMATION
			ROUNDS FOR THE CANCELING
		ERING WILL E	XIST AND BE USED AT THE
DISCRETION OF THE	EMPLOYER.		
Signature			Today's Date
Printed Name			
Printed Name			
VOLUNTEER AGREEN	MENT		
		training video and	I that the answers given by me to all
			my knowledge and belief, true and
			nstances. I understand that any
			in refusal or separation of my
			volunteer services, I agree to conform
			I have read the TISD Volunteer
			s in my volunteer services.
•	-		•
VOLUNTEER SIGNATU	IRE		DATE
V O D O I V I D D I V I I O			5.112
OATH OF CONFIDENT	FIALITY		
I swear to hold all informa	ation not available to th	ne general nublic n	ertaining to the students and staff of
			uss confidential information about
students and staff with TIS			
	r		,

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DATE

VOLUNTEER SIGNATURE

DPS Computerized Criminal History (CCH) Verification(AGENCY COPY)

I,, ac	eknowledge that a Computerized Criminal
History (CCH) check will be performed by accessing	the Texas Department of Public Safety
Secure Website and will be based on name and DOB i	identifiers I supply. (This is not a consent
form.) Authority for this agency to access an individua	al's criminal history data may be found in
Texas Government Code 411; Subchapter F.	
Name-based information is not an exact search	and only fingerprint record searches
represent true identification to criminal history, therefore	ore the organization conducting the
criminal history check is not allowed to discuss with n	ne any criminal history record information
obtained using this method. The agency may request t	hat I have a fingerprint search performed to
clear any misidentification based on the result of the $\underline{\mathbf{n}}$	name and DOB search. Once this process is
completed, the information on my fingerprint criminal	history record may be discussed with me.
In order to complete the process I must make a	nn appointment with the Fingerprint
Applicant Services of Texas (FAST) as instructed onli	ine at www.txdps.state.tx.us /Crime
Records/Review of Personal Criminal History or by ca	alling the DPS Program Vendor at 1-888-
467-2080, submit a full and complete set of fingerprine	ts, request a copy be sent to the agency
listed below, and pay a fee of \$24.95 to the fingerprint	ting services company.
(This copy must remain on file by your agency. Red	quired for future DPS Audits)
Signature of Applicant or Employee	Please: Check and Initial each Applicable Space
Date	CCH Report Printed:
	YES NOinitial
Terrell ISD Agency Name (Please print)	Purpose of CCH:
	Empl Vol/Contractor initial
Agency Representative Name (Please print)	Date Printed initial
	Date i filited Illitial

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Signature of Agency Representative

Date

Destroyed Date: _____

Retain in your files

I understand that the information I am providing about age, gender, and ethnicity will not be used to determine eligibility for employment or approval as a volunteer, but will be used solely for the purpose of obtaining/validating criminal history record information and authorize Terrell ISD to conduct a criminal history check.

I have been notified that a Computerized Criminal History (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers I supply.

Because the name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using the name and DOB method. Therefore, the Terrell ISD may suggest that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

For the fingerprinting process, I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (Automated Fingerprint Identification System). I have been made aware that in order to complete this process I must make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy be sent to the Terrell ISD, and pay a fee of \$24.95 to the fingerprinting services company, L1 Enrollment Services.

Once this is completed and the Terrell ISD receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

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