



Background Check for Volunteers Authorization and Release

I am currently a Volunteer with The Academy, and I understand that in connection with my volunteer service The Academy will be performing a background check on me. This background check will include verification of identity and criminal history.

I understand that The Academy may rely on any part of all of the information in determining my eligibility for continued volunteer service and may exclude me from serving as a volunteer. Information forwarded to the school would be for private use only by the Administrator and/or Governing Board concerning volunteer activities. I further understand that if The Academy chooses not to accept my volunteer service based upon the information, that I will be provided a copy of such information at my request.

I have read this Volunteer Disclosure and by signing below, hereby authorize The Academy to conduct a background check as described herein in conjunction with my volunteer service. I hereby release The Academy from any and all liability related to the procurement of disclosure of any information provided by me or in connection with my volunteer background application. I further direct and authorize The Academy to conduct the background check and further authorize any third parties who may be the custodians of or in possession of the requested information, to disclose such information to The Academy in connection with this background check.

I realize this check is being done solely for the protection of the children who attend The Academy and I voluntarily submit to this check.

Signature

Date

Last Name (printed)

First Name (printed)

Middle Name (printed)

Former Last name(s) (if applicable)

Date of Birth

List the Child(ren) that you will be volunteering on behalf of

Current Address:

Street

City

State

Zip

Former Address(s) (up to 7 years):

Street

City

State

Zip

Street

City

State

Zip

The Academy

Confidentiality Agreement

Volunteers may be involved in virtually every facet of the operation of the school such as working with students on a one-to-one basis or performing tasks not involving students directly. Tasks may also involve services in the library, classrooms, office, and extra curricular activities. I do hereby give The Academy assurance that I will comply with all the school policies including a routine background check.

I understand that in my capacity as a volunteer for The Academy, I may acquire information and knowledge which is either legally protected as confidential, or information and knowledge which is of a personal and private nature.

I understand and agree that I shall not disclose to any other person or organization, any information acquired during my work as a volunteer without express and written consent of that person or from the school's administration. My signature below constitutes my acceptance of the terms of this confidentiality agreement.

Name (printed)

Signature

Date

Administrator Approval