

KENTWOOD PUBLIC SCHOOLS 5820 Eastern Avenue SE Kentwood, Michigan 49508-6200

VOLUNTEER CONSENT FORM (2024-2025)

(OPTIONAL ONLY) Not Required To Register Students

As a prospective volunteer for KENTWOOD PUBLIC SCHOOLS, I understand that it is the district's policy to secure conviction criminal history information as part of their pre-screening process using the information provided below (**PRINT CLEARLY**):

NAME:			
l	_AST	FIRST	MIDDLE
MAIDEN NAME	NAMES PREVIOUS	_Y USED:	
RACE LISTED C (Exam	N ORIGINAL BIRTH (ple: Black, White, Asi	CERTIFICATE: ian, Hispanic, American Indian, etc.)	
BIRTH DATE:			
	(Birthday of vo	lunteer only)	
Male:	Female:		
Police, Lansing,	Michigan. I authorize	Frequired by the Central Records Div Kentwood Public Schools to utilize th only criminal history file search. (ONE F	ne above information for the
VOLUNTEER'S I	NAME (PLEASE PRIN	IT CLEARLY):	
VOLUNTEER'S	SIGNATURE:		
STUDENT'S NAI	ME:		
BUILDING/DEPA	RTMENT:DISCOVER	RY ELEMENTARY	
CONTACT NUM	BER:		
DATE:			
WHAT ARE YOU	J VOLUNTEERING FO	OR EXACTLY? (PLEASE EXPLAIN BR	IEFLY)