

I hereby grant Byron Center Public Schools permission to obtain an online criminal investigation through the Michigan State Police ICHAT website.

ONE APPLICANT PER FORM

Signature of the applicant only

PLEASE COMPLETE THE ENTIRE FORM AND PRINT CLEARLY OR THE FORM WILL BE DENIED!

LEGAL FIRST NAME MIDDLE LAST NAME

RACE: (Circle One) American Indian or Alaskan Native, Asian or Pacific Islander, Black or African American, Hispanic, White or Other

SEX: (Circle One) Male or Female **DATE OF BIRTH:** _____

Daytime Phone Number: _____

(Circle) Yes or No Do you have children who attend BCPS? If so please list the student(s) name and the building they attend.

Student Name	Building they attend	Relationship to student

POSITION(S) TO BE HELD (Circle One) If nothing is circled, the form will be denied.

- Classroom Volunteer (Will be working one-on-one or with a small group of students)
- Field Trip Volunteer (Will be in charge of a group of students)
- Volunteer Sports Coach - Sport: _____
- New Employee – Position and Building: _____
- Other: _____

Start Date/Event Date: _____ **Approved or Denied by:** _____