## SEDALIA SCHOOL DISTRICT #200 SCHOOL VOLUNTEER

I understand that an on-line Missouri State Highway Patrol Request For Criminal Record Check AND

an on-line Division of Family Services Request for Child Abuse or Neglect/Criminal Record will be processed by the Sedalia School District #200

The total cost will be \$14.25 (includes \$1.25 service charge by MSHP)

This amount will be paid by the Sedalia School District

I understand that the results of this record check must be favorable in order for me to volunteer.

I understand that in the course of my volunteer time with the Sedalia School District #200, I may become aware of confidential information about specific students. This information may include such information as students' grades, academic performance, behavior, disabilities, and related matters. I understand and agree that I will not disclose such confidential information except to school employees that have a need to know. I will be required to comply with the rules, regulations, and policies of the district and with the directives of the administration.

Name of Volunteer		_Phone No
Address		, City, State, Zip
Have you ever been conv	victed, or plead gui	Ity to a felony or a misdeamor related to sexual misconduct?
Yes	No	If yes, please provide details:
Has a finding of probable	cause of child abu	se by any state agency been entered against you?
Yes	No	If yes, please provide details:
FALISIFICATION OF THIS	S DOCUMENT IS A	MISDEAMOR.
Signature of Volunteer		Date
Signature of Principal		Date
Building(s) Volunteer will	be at:	