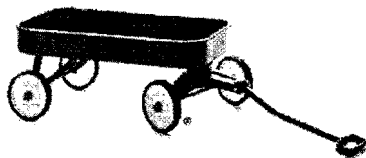


Amarillo ISD

Volunteer Registration/Background Information



America's Promise

TEXAS EDUCATION CODE 22.083 AUTHORIZES A SCHOOL DISTRICT TO OBTAIN THE CRIMINAL HISTORY OF EVERY VOLUNTEER IN THE SCHOOLS. THEREFORE, AS A PART OF YOUR VOLUNTEER APPLICATION PROCESS, WE ASK YOU TO COMPLETE THE FOLLOWING:

PLEASE PRINT CLEARLY

Last Name _____ First Name _____ MI _____ Mr./Ms./Dr. _____

Address _____ City _____ Zip _____ e-mail address _____

Home Phone _____ Work Phone _____ Cell/Pager _____ (Birthday (Month, Day, Year)) _____

U.S. CITIZEN YES NO Please Circle

Sex: Male Female Race: (Circle One) American Indian Asian Black Hispanic White/Other

If you have lived in Texas less than 5 years, please list your previous, complete address.

Address: _____
City, State, ZIP _____

Name of Campus where you will be volunteering : Kids Cafe

I hereby authorize any law enforcement agency, including a police department, the Texas Department of Public Safety and the Texas Department of Corrections, to release to Amarillo Independent School District my complete criminal history record. I understand that the Amarillo Independent School District is prohibited by Federal Regulations from providing me with a copy of my DPS criminal history record; however, I further understand that, upon my request, the District may quote to me data from the report. Thereafter, I have the right to challenge the accuracy of my DPS criminal history record.

I understand that the information I am providing about age, sex, and race/ethnicity will not be used to determine volunteer eligibility, but will be used for the purpose of obtaining criminal history record information.

Bolded and underlined printed information above is required by the state for the background check.

Signature

Date

Affiliation Information

Check One: Parent Business Community (civic, church, agency)

If Parent, please name your child/children attending AISD: _____

If business person, please name your Company: _____

Do you receive release time? YES No

If Community Person, please name your organization: _____

For Office Use Only:

COMMENTS: