



Brandon School District

Volunteer/Coach Data Sheet

Please Print

Today's Date: _____ School/Building: _____

Name: _____
Last First Middle Initial

Address: _____

Phone Number: _____ Email: (Coaches Only) _____

** Birth Date: _____ Social Security #: XXX-XX- _____

** Sex: _____ ** Race: _____

Maiden or Other Name: _____ Child/Students Name: _____

**** Birth Date, Sex and Race are only required to ensure accuracy of requested criminal history records.**

As a volunteer, I understand the District's policy to secure criminal history information as part of its screening process. I authorize Brandon School District to utilize the information provided above which is required by the Central Records Division of the Michigan State Police, Lansing, Michigan, for the sole purpose of doing a criminal history file search. *(ICHAT & Sex Offender Searches)*

Signature

Date

Please promptly return a copy of this form to the Human Resource Department upon signing up as a volunteer to work in your building three (3) days or more a week, or for an overnight event.

Human Resource Department Only

School Year	ICHAT Date	Sex Offender Date	Verified By