



BOARD OF EDUCATION

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ADMINISTRATION

DEANNE MEADOWS
Superintendent

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Associate Superintendent

MEMORANDUM

TO: Principals

FROM: Deanne Meadows, Superintendent 

DATE: July 11, 2023

SUBJECT: School Volunteers/Field Trip Chaperones, SY 2023-2024

You are to notify all parents, by a letter and the School Messenger system, to inform them the request for school volunteers/field trip chaperone forms are now available for the 2023-2024 school year. A copy of your letter, as evidence, that you have notified all parents should be forwarded to my office.

All completed background forms with a copy of **their current driver's license and social security card must be attached to the form** completed by the volunteer requesting approval and received by Bonita Pridgen. You are reminded to collect the fee **(\$10.00 per person)** from the school volunteer/field trip chaperone for their background check. Be sure to include one check from your school for payment of the background checks at the same time.

School volunteers/field trip chaperones forms can be collected on a monthly basis. The date they are received by Bonita Pridgen and the date the background check results are received will determine the date they are placed on Board actions for Board approval. **No School Volunteers/Field Trip Chaperones may begin before Board approval is granted. You will be notified via email and/or you may check the personnel actions and addendum following each Board of Education meeting. Volunteer coach information needs to be submitted to Human Resources.**

If you have any questions and/or concerns, please do not hesitate to contact Bonita Pridgen at (910) 642-5168 extension 24049.

Enclosure

SCHOOL VOLUNTEER RELEASE AND AUTHORIZATION

In connection with my application for volunteering with Columbus County Schools, I hereby authorize Columbus County Schools and Screening One, Inc. to perform a criminal background screening check. I understand and agree to the following:

1. A background check is not only for the benefit of Columbus County Schools as a sound business practice, but also for the benefit students and employees.
2. All reports are confidential, and provided to Columbus County Schools for volunteer decisions only.
3. I may review or obtain a copy of my report as provided by law. Screening One, Inc. may be contacted by writing to: Screening One, Inc. 2233 West 190th Street, Torrance, CA 90504.
4. I authorize and release people, companies, references, current and former employers, schools, credit bureaus, municipal, county, state and federal agencies and courts, and agencies that provide motor vehicle records, to provide all information that is requested by Columbus County Schools or Screening One, Inc.
5. I further release all of the above, including Columbus County Schools and Screening One, Inc., to the full extent permitted by law, from any liability or claims arising from retrieving and reporting information concerning me.
6. I agree that a copy or fax of this document shall be valid as the original.

Signature of Volunteer _____ Date _____

COURTS AND OTHER ENTITIES REQUIRE THE FOLLOWING INFORMATION FOR IDENTIFICATION WHEN CHECKING PUBLIC RECORDS. IT IS CONFIDENTIAL AND IS USED FOR IDENTIFICATION ONLY. YEAR OF BIRTH ENSURES ACCURACY AND AVOIDS DELAY.

PLEASE PRINT INFORMATION REQUESTED BELOW

FIRST NAME	
MIDDLE NAME	
LAST NAME	
VALID DRIVERS LICENSE	
SOCIAL SECURITY NUMBER	
DATE OF BIRTH	
ADDRESS (911)	
CITY	
STATE	
ZIP	

COLUMBUS COUNTY SCHOOLS REQUIRES A **\$10.00 FEE** (CASH OR MONEY ORDER – NO CHECKS) TO COMPLETE THE CRIMINAL RECORD REQUIRED BY N.C. GENERAL STATUTES.

PLEASE NOTE: You must provide, along with this completed form, a copy of your drivers' license and social security card in order for Screening One to perform the background screening. Failure to submit these items will result in you not being allow to serve as a school volunteer.

**VOLUNTARIO DE LA ESCUELA
DIVULGACIÓN Y AUTORIZACIÓN**

En relación con mi solicitud de voluntariado con las Escuelas del Condado de Columbus, autorizo a las Escuelas del Condado de Columbus y Screening One, Inc. a realizar una verificación de antecedentes penales. Entiendo y acepto lo siguiente:

1. Una verificación de antecedentes no es solo para el beneficio de las Escuelas del Condado de Columbus como una práctica comercial sólida, sino también para el beneficio de los estudiantes y empleados.
2. Todos los informes son confidenciales y se proporcionan a las Escuelas del Condado de Columbus solo para decisiones relacionadas con el voluntariado.
3. Puedo revisar u obtener una copia de mi informe según lo dispuesto por la ley. Puedo comunicarme con Screening One, Inc. escribiendo a: Screening One, Inc. 2233 West 190th Street, Torrance, CA 90504.
4. Autorizo y exonero de responsabilidad a personas, empresas, referencias, empleadores actuales y anteriores, escuelas, agencias de crédito, agencias y tribunales municipales, del condado, estatales y federales, y agencias que proporcionan registros de vehículos motorizados, para proporcionar toda la información solicitada por las Escuelas del Condado de Columbus o Screening One, Inc.
5. Además, exonero de responsabilidad todo lo mencionado anteriormente, incluidas a las Escuelas del Condado de Columbus y Screening One, Inc., en la medida permitida por la ley, de cualquier responsabilidad o reclamo que surja de recuperar e informar datos acerca de mi persona.
6. Acepto que una copia o fax de este documento será válido como el original.

Firma del Voluntario _____ Fecha _____

LOS TRIBUNALES Y OTRAS ENTIDADES REQUIEREN LA SIGUIENTE INFORMACIÓN PARA IDENTIFICACIÓN AL VERIFICAR REGISTROS PÚBLICOS. ES CONFIDENCIAL Y SE UTILIZA SOLO PARA LA IDENTIFICACIÓN. EL AÑO DE NACIMIENTO ASEGURA LA PRECISIÓN Y EVITA EL RETRASO.

FAVOR DE ESCRIBIR LA INFORMACIÓN SOLICITADA A CONTINUACIÓN

PRIMER NOMBRE	
SEGUNDO NOMBRE	
APELLIDO(S)	
NÚMERO DE LICENCIA DE CONDUCIR	
NÚMERO DE SEGURO SOCIAL	
FECHA DE NACIMIENTO	
DOMICILIO (911)	
CIUDAD	
ESTADO	
CÓDIGO POSTAL	

LAS ESCUELAS DEL CONDADO DE COLUMBUS REQUIEREN UNA **TARIFA DE \$10.00** (EN EFECTIVO O GIRO POSTAL – NO CHEQUES) PARA COMPLETAR LA VERIFICACIÓN DE ANTECEDENTES PENALES REQUERIDO POR LOS ESTATUTOS GENERALES DE CAROLINA DEL NORTE.

TENGA EN CUENTA: Usted debe proporcionar, junto con este formulario completado, una copia de su licencia de conducir y tarjeta de seguro social para que Screening One realice la evaluación de antecedentes. Si no envía estos documentos, no se le permitirá servir como voluntario escolar.