

PLEASE FILL OUT ENTIRE FORM



Office of Volunteer Services
80 W. Southern Ave (Redmond- Potter Building)
Muskegon, MI 49441-2574
Tel.: 231.720.2825 Fax: 231.720.2896

CRIMINAL HISTORY RECORD/SEX OFFENDERS REGISTRY
CONSENT FORM

MUSKEGON VOLUNTEER PARTNERS (MVP)

As a prospective volunteer of Muskegon Public Schools, I understand that it is this Public School's policy to secure criminal history information as part of their volunteer screening process using the information provided below. Please print legibly.

NAME Last First Middle

Maiden name or names previously used

Birth date Race Sex

Address: City/State Zip

Email:

Driver's License/State ID #

Building and/or Program/Event

Phone Number: () Cell: ()

Please attach a copy of their Driver's License/State ID for identification purposes. I understand that the above information is required by the Central Records Division of the Michigan State Police. I authorize Muskegon Public Schools to utilize the above information for the sole purpose of obtaining a criminal history and sex offender's registry (SOR) file search.

Signature Date

Authorized Approval Signature Date

Your Building name

Student's name:

Teacher's name

Office Use Only
Date Requested: Pend
Date
Date Received: Applicant
Notified