

GREEN BAY AREA PUBLIC SCHOOL DISTRICT
VOLUNTEER'S DISCLOSURE & CONSENT RELEASE OF INFORMATION
The Green Bay Public School District is a Drug-Free District.

SCHOOL _____

POSITION: VOLUNTEER

VOLUNTEER NAME (Please Print): _____ **PHONE NO.** _____

It is the policy of the Green Bay Area School District to obtain consumer or investigative consumer reports on prospective volunteers. Such reports are obtained in accordance with the federal Fair Credit Reporting Act and are only used in a manner, which does not violate local, state or federal equal employment opportunity laws or regulations. In order to obtain a consumer report, the following information is required. **Please fill out the form accurately and completely. Please type or print legibly.**

VOLUNTEER'S *Disclosure & Consent* RELEASE OF INFORMATION

VOLUNTEER INFORMATION (Please Print)

Green Bay Area Schools

Volunteer Name: (First Middle Last)	Current Address: (street address)		
Other Name(s) Used: (like Maiden)	City:	State:	Zip:
2. Other Name(s) Used:	Former Address: (1)		
Social Security No:	City:	State:	Zip:
Driver's License No.:	State:	Former Address: (2)	
Date of Birth:	Place of Birth: (City, State, Country)	City:	State: Zip:

Volunteer Instructions: Please read this disclosure and consent form carefully before signing. You will be provided with a copy of this form at any time upon request.

DISCLOSURE AND CONSENT CONCERNING REPORTS FOR VOLUNTEER PURPOSES.

You should read carefully. This consent and release has been provided to you for the Green Bay Area Public Schools to request a consumer report or investigate consumer reports in connection with your application to volunteer. Such reports will include criminal background checks.

The Volunteer acknowledges that the Green Bay Public School District may now, or at any time while volunteering verify information within the application. The verifications and/or checks may include but are not limited to: driving record, workers compensation records, personal references, any educational and licensing institution and to receive any criminal record information pertaining to me which may be in the files or any Federal, State or Local criminal justice agency in Wisconsin or any other state. The results of this verification will be used to determine eligibility. All results will be kept CONFIDENTIAL. The information obtained will not be provided to any parties other than to designated Green Bay Area Public School District personnel.

According to the Fair Credit Reporting Act (FCRA), if any adverse decision is made with regard to application, based entirely or in part on the information contained in a consumer report or investigative consumer report prepared by a consumer reporting agency you are entitled to receive a copy of this report upon written request, and a summary of your rights under the FCRA.

CONSENT STATEMENT

I have carefully read and understand this disclosure and consent form and by my signature consent to the release of consumer or investigative consumer reports use by the vendors selected by the Green Bay Area Public School District, as defined above in conjunction with my application to volunteer. I further understand this consent will apply during the course of my volunteer time, and that such consent will remain in effect until revoked in a written document signed by me and delivered to the Green Bay Area Public School District. In the event that I wish to refuse or revoke my consent at any time, I understand that I may do so. I further understand that any and all information contained in my this application, or otherwise disclosed to the Green Bay Area Public School District by me may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the Green Bay Area Public School District and confirm that all such information is true and correct.

I, the undersigned applicant, do hereby certify that the information provided by me for the purpose to volunteer with the Green Bay Area Public School District is true and complete to the best of my knowledge. I understand that if any item is not true, that may result in my not being allowed to volunteer with the Green Bay Area Public School District or may be cause for possible dismissal. A photocopy or telephonic facsimile (Fax) of this Disclosure and Consent authorization for Release of Information shall be valid as the original.

VOLUNTEER'S SIGNATURE _____

DATE _____