

# VIPS...Volunteers in Public Schools

Volunteer Access to Run Background Check

First Time Volunteers please provide name as it appears on Driver's License	
Last Name	
First Name	
Middle	
Maiden	
Driver License #	
Date of Birth	
Street Address	
City, State, Zip	
Home Phone #	
Cell Phone #	
Email Address	
Student Name	
Students Teacher	
Signature	

**Attach copy of Driver's License, State ID or Resident Alien Card**

***If you have previously registered and been cleared through the background process , please attach a copy of your driver license to this form. Fill out the student name above and return the form to the student's homeroom teacher. This is required to be cleared for the 2011-2012 school year.***

## **Opt Out**

\_\_\_ I do not wish to participate and/or volunteer in any school activities, trips, etc. I do not authorize a background check at this time.

Parent Name:

Parent Signature:

Student: