

POTTERVILLE PUBLIC SCHOOLS
420 N HIGH STREET
POTTERVILLE, MI 48876

VOLUNTEER

Authorization for Background Investigation

I hereby willingly consent to the completion of a background investigation, and authorize the district and/or their agents, to request from any person or former employer any records or information which pertains to me. I further consent to disclosure of such information, if any, to them or their agents by any person or former employer. I release any person and his or her employer from any claim of liability for disclosure of information concerning me to **Potterville Public Schools** or its agents.

It is my understanding that any information obtained in the course of the background investigation will be held strictly confidential by **Potterville Public Schools** and its agents. Information gathered will be used only in connection with the volunteer screening process.

THIS IS A RELEASE OF INFORMATION
READ CAREFULLY

Signature of Volunteer Date

Signature of Witness Date

I understand that this authorization and criminal conviction history information will be retained until the end of the 2011-2012 school year.

Please Initial