

CHAPERONE PACKET

- **State of Delaware and FBI Criminal Background Check Required**
- **\$30 fee (to be paid by individual, school, or organization to the State Bureau of Identification.) *Note: other State of Delaware agencies may submit “true copy” of the State of Delaware and FBI Criminal Background Check for clearance if the volunteer is currently employed at the state agency.**
- **Required for all overnight field trips**
- **Required for any event where volunteer or chaperone will be outside the sight of teacher/administrator**

To obtain a State of Delaware and FBI Criminal Background Check, please go to:

**BLUE HEN CORPORATE CENTER AND MALL
SUITE 1B
655 BAY ROAD (US 113)**

HOURS:

Monday, 9:00AM – 7:00PM

Tuesday through Friday, 9:00AM – 3:00PM

cash, money order, Visa, MasterCard and Discover accepted

Personal checks are NOT accepted

**Caesar Rodney School District
SCHOOL VOLUNTEER ENROLLMENT FORM**

Name: _____
Last First Middle

Address: _____
Street City State Zip

Telephone: (Home) _____ (Work/Cell) _____

Emergency Contact: Name _____ Phone: _____

Circle the school for which you are interested in volunteering (If you want to volunteer at more than one school, please obtain principal approval for each school):

Allen Frear Brown Charlton Fifer Middle McIlvaine Welch Stokes
Star Hill Simpson Postlethwait Middle CRHS Dover Air Base Middle

I would like to ...

- BE A CLASSROOM VOLUNTEER or CHAPERONE where CR staff are present
(NO Criminal Background Check required)
- MENTOR STUDENTS (Criminal Background information required – no charge)
- BE A CHAPERONE –Overnight trips or where no CR staff are present
(State of Delaware and FBI Criminal Background required - \$30 charge paid directly to DE State Police)

Please list two references (excluding family):

Name	Address	Phone (work/home/cell)
_____	_____	_____
_____	_____	_____

Volunteer Contract:

As a volunteer at _____ I agree to:

- Respect confidentiality when dealing with students and school staff.
- Abide by the rules and policies of the school and the school district.

Signature of Volunteer: _____ Date: _____

Signature of Principal*: _____ Date: _____

*Principal approval required before volunteering, mentoring, or chaperoning.

This enrollment form will be kept on file at the school site and the District Office. *If your child moves to another school, you will need to complete a new application to Volunteer , Mentor or Chaperone at that school and provide the appropriate documents.

Caesar Rodney School District
Volunteer, Mentor, Chaperone Disclosure Form

It is the policy of the Caesar Rodney School District to make every reasonable effort to provide a safe learning environment for students working with volunteers, mentors, and chaperones. Subsequently, the District requires the following confidential information from volunteers, mentors, and chaperones who directly work with students.

This form must be completed and returned to the Office of Human Resources prior to beginning a volunteer, mentor, or chaperone experience in the Caesar Rodney School District.

1. Have you ever been convicted of a crime other than a minor traffic violation? Yes No
If yes, please explain: _____

2. Have you ever been convicted, or had an administrative finding, of violating any law involving child abuse, sexual abuse, sexual harassment or exploitation, or any other crime related to children? Yes No
If yes, please explain: _____

3. Are you required to register as a sex offender with the Sex Offender Registry? Yes No
If yes, please explain: _____

4. Do you currently have charges pending or are there any ongoing investigations relating to any of the aforementioned? Yes No
If yes, please explain: _____

I, as a volunteer, mentor, or chaperone working in the Caesar Rodney School District, fully understand that this position is, as stated, on a volunteer basis, which inherent in its meaning, entitles me to no pay or any form of compensation for my services. I understand that the volunteer agreement can be terminated without notice at any time by either the school district or the volunteer.

I authorized the Caesar Rodney School District to review my personal background. I understand that any volunteer, mentoring, or chaperone assignment may be contingent upon the results of a complete criminal background investigation. I understand that any misrepresentation on any of the volunteer enrollment form may result in immediate disqualification from any volunteer service within the district. I understand the Caesar Rodney School District reserves the right to deny my application to serve as a volunteer, mentor, or chaperone.. I hereby release the District, its board and its agents, as well as all providers of information, from any liability related to furnishing and receiving information related to this process.

Signature

Date

Please return this form to your student's school or to the Office of Human Resources, Caesar Rodney School District 7 Front Street., Wyoming, DE 19934.

**DELAWARE DEPARTMENT OF EDUCATION
HEALTH QUESTIONNAIRE FOR VOLUNTEERS, MENTORS, CHAPERONES**

All school employees are required to have a tuberculosis (TB) skin test. The purpose of this requirement is to safeguard school-aged children from exposure to TB in the school setting. In the same way, this QUESTIONNAIRE is designed to identify volunteers who MAY have been exposed to TB and thus need further screening. A school designee will collect and monitor the Health Questionnaire, which will be stored in the School Nurse's office in a confidential manner.

Please consider the following questions:

1. Have you ever lived or been in close contact with anyone who had TB disease?
2. Have you ever had a positive HIV test?
3. Have you ever used illegal intravenous drugs?
4. Have you ever been incarcerated?
5. Have you ever been homeless?
6. Do you currently have any of the following symptoms which are unexplained and which have lasted at least three weeks?

Cough
Fever
Night sweats
Weight loss

7. Consider the list of countries/continents below:

- Africa
- Asia, including China, Vietnam, Korea, Indonesia, India, Pakistan, Bangladesh
- Eastern Europe, including Russia and former Soviet Union, Armenia
- Haiti
- Latin America, including Mexico, Guatemala, and South America
- Pacific Islands, including Philippines

Were you born in one of these countries?

Have you ever stayed/lived in one of these countries for 1 month or longer?

Have you ever lived or been in close contact with someone who stayed/lived in one of these countries for 1 month or longer?

Can you answer "yes" to any of the above questions? Yes No

If you checked yes, you are required to have a Mantoux test prior to your assignment as a volunteer.

Have you ever had a positive skin test for tuberculosis? Yes No

If you checked yes, you are required to provide documentation related to current disease status prior to your assignment as a volunteer, mentor, or chaperone.

These requirements are for the safety of our school and for your personal health. Screening for tuberculosis is recommended by health professionals for any individual who is at risk. Routine screening, using a Mantoux tuberculin skin test, can detect if a person has been exposed to tuberculosis. Such early identification is of great benefit in reducing the effects of disease.

If you have any questions about your risk of infection, please speak with your healthcare provider or plan to discuss it at your next examination. For additional information, you can contact the Delaware Division of Public Health TB Elimination Program at 302-739-6620.

PRINTED NAME

SIGNATURE

DATE