

Volunteer Record Check

Only ONE form needs to be completed by a volunteer each school year. THIS FORM WILL BE GOOD FOR ALL BUILDINGS IN THE DISTRICT. Please print clearly in ink.

Auburn CUSD # 10
606 North Street
Auburn, IL 62615

Clerk of the Circuit Court
200 South 9th Street
Springfield, IL 62701

A Police Record Check and child sex offender list check is requested on the following individual who has indicated a desire to participate as a volunteer in one of our schools. Our district requires that a background check be made each year to try to provide for the most positive influence upon our students.

Name _____
 First Middle Maiden Last

Home Address _____ Home Phone _____

Length of Residence in Sangamon County _____ Previous County of Residence _____

Employer _____ Work Phone _____

Employer's Address _____

Social Security # _____ Drivers License/ID # _____

Place of Birth _____ Date of Birth _____
 City County State

Mother's Full Name _____
 First Middle Maiden Last

Father's Full Name _____
 First Middle Last

Please list your children, their school(s), and their grade level in the district.

I hereby consent to the release of any public record information requested by the Auburn Community Unit District # 10.

Applicant's Signature _____ Date _____

Principal's Signature _____ Date _____

District Office Approval _____ Date _____