



## Temple ISD Volunteer Application

Temple Independent School District requires that any persons willing to volunteer with TISD, must submit the following information:

- Temple ISD Volunteer Application     Copy of picture identification     DPS Computerized Criminal History Verification

This process may take up to (1) week. The volunteer application is available online at [www.tisd.org](http://www.tisd.org).

### DEMOGRAPHIC INFORMATION

All information provided will be treated as personal and confidential. The information that you provide regarding your age, gender, and ethnicity will not be used as selection criteria. This information will be used exclusively for the purpose of maintaining demographical statistics for the district and obtaining criminal history record information.

Legal Name: \_\_\_\_\_ Application Date: \_\_\_\_\_  
FIRST MIDDLE LAST

Home Address: \_\_\_\_\_  
ADDRESS CITY STATE ZIP

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender:  Female  Male Email Address: \_\_\_\_\_

Ethnicity:  African American  American Indian  Anglo/White  Asian  Hispanic  Other: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone # \_\_\_\_\_

### CAMPUS VOLUNTEER INFORMATION

CAMPUSES:  ANY/ALL  THS  Edwards Academy  Bonham  Lamar  Travis  Wheatley  Meridith  
 Cater  Garcia  Jefferson  Kennedy-Powell  Raye-Allen  Scott  Thornton  Western Hills

Languages Spoken: Please check all that apply  English  Spanish  Other: \_\_\_\_\_

Volunteer Purpose: Please check all that apply

- Chaperone (Field trip, School Dance, Fundraiser)     Afterschool Activity     PTO  
 Classroom Assistance (Reading, Tutoring, etc)     Guest Speaker     Wildcat Mentor  
 Other: \_\_\_\_\_

**The Temple Independent School District is required by state law to obtain criminal history record information on all volunteer applicants for the district (Texas Education Code Section 22.083).**

I authorize Temple Independent School District to conduct a DPS Computerized Criminal History (CCH) verification check.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## DPS Computerized Criminal History (CCH) Verification Form

I, \_\_\_\_\_, have been notified that a computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on Name and DOB information I supply.

APPLICANT or EMPLOYEE NAME (Please Print)

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment and submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

**(This copy must remain on file by TISD. Required for future DPS audits)**

\_\_\_\_\_  
Signature of Applicant or Employee

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

**Temple ISD**  
\_\_\_\_\_  
Agency Name (Please print)

**Dr. Nichole Riley**  
\_\_\_\_\_  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

Check and Initial each Applicable Space		
CCH Report Printed:		
YES _____	NO _____	_____ Initial
Purpose of CCH: <u>Volunteer</u>		
Eligible _____	Ineligible _____	_____ Initial
Date Printed: ____ / ____ / ____		_____ Initial
Date Destroyed: ____ / ____ / ____		_____ Initial
<b>Retain in your files.</b>		