



# Minocqua J1 School District

## RECOMMENDATION FOR APPROVAL

### BACKGROUND CHECK/INFORMATION SHEET

Person Making Initial Recommendation \_\_\_\_\_

Position Volunteer/Candidate is being recommended for \_\_\_\_\_

**\*\*Volunteer/Candidate's Legal Name** \_\_\_\_\_

**\*\*Volunteer/Candidate's Date of Birth** \_\_\_\_\_

Volunteer/Candidate's Physical Address \_\_\_\_\_  
\_\_\_\_\_

Volunteer/Candidate's Mailing Address (if different from above) \_\_\_\_\_  
\_\_\_\_\_

Volunteer/Candidate's Phone Number \_\_\_\_\_

**\*\*Volunteer/Candidate's Driver's License Number** \_\_\_\_\_

**\*\*Other States Volunteer/Candidate has Resided (include years)** \_\_\_\_\_

**\*\*Candidate's Signature** \_\_\_\_\_

**\*\*REQUIRED INFORMATION**

# Minocqua J1 School District

## Parent and Community Volunteer Confidentiality Agreement

Minocqua J1 is very fortunate to have many volunteers! As the room parent and volunteer program grows, it is necessary to protect each student's right to confidentiality. Information and/or observations regarding students' behaviors, abilities, etc. is confidential. As a volunteer in our school, it is important that you help protect all children by keeping such information and/or observations confidential. To ensure that all volunteers understand the seriousness of this matter, we are asking all volunteers to sign the confidentiality agreement below. Thank you for your dedication to our school and for helping protect the rights of all of our children!

I, \_\_\_\_\_,  
(please print)

understand the need to respect the right to confidentiality of all students.

I, therefore, agree not to discuss the behavior and/or ability of any students.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)

**Parent and Community Volunteers  
are asked to sign this form  
prior to volunteering at the  
Minocqua J1 School District**