

**LITTLE CYPRESS-MAURICEVILLE CISD
Volunteer Background Check Permission Form**

Please complete this form if you plan to volunteer in any capacity during the year; including field trip chaperone, class parties, weekly classroom volunteer, or any other volunteer position.

CONFIDENTIAL

In an effort to provide the safest possible environment for our students, the Little Cypress-Mauriceville Consolidated Independent School District obtains criminal history information on each prospective volunteer annually. The information requested below is necessary for this safeguard and will be held strictly confidential.

Please PRINT:

1. Full Name:

First	Middle	Last
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2. If you have completed this form for another of your children for the 2023-2024 school year, please skip lines 3 - 6 and sign your name on the signature line below.

3. **Date of Birth:** _____ **Gender:** Male Female

4. **Ethnicity:** Asian Black Hispanic White Other

5. **Campus(es) where you will serve:** _____

6. **I am a:** Parent Grandparent Business/Industry Volunteer Community Member Other
(Please check all that apply)

I understand the information I am providing about age, sex and ethnicity will be used solely for the purpose of obtaining criminal history record information.

Volunteer Signature

Child(ren)'s Name(s) and Campus(es)

If you have questions or need additional information, please contact your child's campus.

MVE	LCE	LCI	LCJH	MMS	LCMHS
409-745-3970	409-883-2838	409-886-4245	409-883-2317	409-745-1615	409-886-5821