

# Anderson School District Five

P.O. Box 439 / 400 Pearman Dairy Road • Anderson, SC 29622  
Phone: (864) 260-5000 • Fax: (864) 260-4463 • www.anderson5.net



Dear Volunteer:

We appreciate your willingness to volunteer in our schools. Having caring and compassionate volunteers working with our young people is a priority of District Five. Another priority of the District is the safety and security of our students. We work very hard to ensure that our students are provided with a safe and secure environment on a daily basis.

With our students' safety in mind, District Five requires a background check on any individual who will be in a supervisory role or in direct contact with a District Five student or students. For example, tutors, volunteers, and field trip chaperones must all have background checks before working with our students. The type of background check completed is dependent upon the volunteer's role at the school. At a minimum, the district will perform a National Sex Offender Registry check on all volunteers. A South Carolina SLED check may be required for volunteers with close contact with students.

Parents visiting our schools as guests that have not been assigned responsibilities with students are not required to have background checks. However, all visitors are required to sign-in upon arrival at the school. Schools with the appropriate technology may run a driver's license check on all visitors.

If you would like to be involved in your child's school as a volunteer, it is vital that you complete all sections of the volunteer form; printing clearly and legibly with accurate information. If you have a child at multiple schools in District Five, only one background check is required. Please alert the appropriate school(s) that you have a background check on file with the district. All background checks are strictly confidential. Only appropriate district and school level administrators will have access to your background information.

We feel that protecting the children in District Five is a major responsibility of our schools and district; therefore, we hope that you understand the need for us to be diligent and thorough in our screening of volunteers.

Thank you for your cooperation in this matter.

Most sincerely,

A handwritten signature in black ink that reads 'Thomas A. Wilson'. The signature is written in a cursive, flowing style.

Thomas A. Wilson  
Superintendent

ANDERSON SCHOOL DISTRICT FIVE  
School Volunteer Form

**TO BE COMPLETED BY ALL VOLUNTEERS HAVING A SUPERVISORY ROLE WITH STUDENTS.**

**PRINT ALL RESPONSES USING BLUE OR BLACK INK**

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| First Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Middle Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Last Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Maiden Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Address |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| City |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Gender (circle) M F Race \_\_\_\_\_

Phone #'s (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Month Day Year

Area(s) in which you wish to volunteer: Please check below all that apply

Tutor     School Volunteer     Chaperone     Other – describe

**SLED CHECK REQUIRED FOR THE FOUR (4) AREAS BELOW**

Mentor (Must complete the Mentor Application)     Overnight Chaperone     One-on-One Tutor  
 Approved driver of students to events

Have you served as a tutor or chaperone in one of our schools before? YES NO

If YES, which school(s) \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

Anderson School District Five promises to provide a safe, nurturing environment for our students. We respectfully request that all volunteers having a supervisory role with students complete a background check. All of our school employees do this at time of hire. All background check information is confidential and is kept in accordance with state, federal and local regulations. Thank you so much for helping our students and our schools!

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ School: \_\_\_\_\_