

VOLUNTEER STATEMENT

I, _____ have never been convicted of any crime in any state, nor have I, ever had any record of any founded child abuse or dependent adult abuse in any state.

OR

I, _____ have been convicted or have a founded child abuse or dependent adult abuse report. The crime (other than minor traffic offenses such as speeding, stop sign violation, parking tickets) or founded child abuse or dependent adult was for _____ and was committed in _____

(city, county or state) approximately _____ (date). I feel the following information should be considered when reviewing this information. (Circumstances or issues surrounding the crime or founded report, treatment or rehabilitation following the crime or report, steps taken to correct the matter). Please feel free to provide this information on the back of the form or attach additional pages as needed. I understand this matter will be held in strict confidence by the agency.

AND

I, _____ understand a criminal record and child abuse registry check will be completed prior to my being considered in the child: staff ratio and every five years thereafter.

AND

If after signing the above statements I, _____ am convicted of any crime in any state or have any record of founded child abuse or dependent adult abuse report in any state its my responsibility to report this information immediately to my supervisor prior to volunteering again in the center.

AND

I, _____ understand as a volunteer I am a mandatory reporter of child abuse, but I am exempt from having to complete the minimum of two hours of Iowa's Mandatory Reporters of Child Abuse training. I understand my responsibilities and have read the child abuse reporting policy.

AND

I, _____ indicate I have no communicable diseases or other health concerns that would pose a threat to the children or other staff in the center.

Signature of volunteer

Date

**** all volunteers will sign the above statements

**** Volunteers considered in the child: staff ratio will also complete Form 595-1396 (Criminal Record Check Form B) and will submit to the day care consultant immediately.