

DHS-1929, CENTRAL REGISTRY CLEARANCE REQUEST

Michigan Department of Health and Human Services
(Revised 5-23)

COPY PHOTO ID HERE
OR
ATTACH A SEPARATE PAGE

SECTION 1 – INFORMATION ON PERSON BEING CLEARED

Name, (First, Middle, Last)

Maiden Name, Aliases, also known as (A.K.A)

Social Security Number

Date of Birth

Address

City

State

Zip Code

Phone Number

Email

☐ I would like to pick up my results in _____ County (For Michigan Residents Only).

Signature Required for Individual Being Cleared

Date

SECTION 2 – REQUESTER INFORMATION

Check Appropriate Box

☒ Employer

☒ Volunteer Agency

☐ Out-of-State Child Caring Institution

☐ Out-of-State Adoption/Foster Care Home Screening

☐ Michigan Court/Law Enforcement/Department of Corrections/Prosecuting Attorney

☐ Individual Self-Request

Name of Agency or Organization

Calhoun Christian School

Name of Requester

Rhea Bennett

Address

20 Woodrow Ave S

City

Battle Creek

State

MI

Zip Code

49015

Email

rhea.bennett@calhounchristian.org

Fax

269-965-8038

Phone Number

269-965-5560



Chaperone / Volunteer Agreement

As a chaperone/volunteer of Calhoun Christian School (CCS), I agree to:

- Allow CCS to conduct a background check on me. The reports to be run include I-CHAT and CRC.
- At the request of CCS, complete and sign the Department of State – Record Look-up Request form granting CCS permission to secure a copy of my current driving record.
- Supervise the students assigned to me.
- Have all students “buckled up” and in appropriate seats (car seats, if needed) in vehicles.
- Follow all CCS rules and guidelines.
- Follow all CCS Dress Code guidelines.
- Participate with the students in all activities while on the trip.
- Require the students to follow CCS rules and guidelines. If I observe a student misbehaving (even one not assigned to me), I will do the following:
 - Tell the student to stop the inappropriate behavior.
 - Immediately notify the “teacher in charge” of the offense.
 - Allow the teacher to handle the matter and not talk about the offense to other chaperones or students (including my own children).
- If the trip involves an overnight stay, I will make sure that my students are in their assigned rooms at the time designated by the “teacher in charge” and remain there for the entire night. I will not share a bed with any student other than my own child.

As a chaperone/volunteer of CCS, I self-certify that:

- I have not been named in any petition which is/was pending before a civil or criminal court of competent jurisdiction (i.e., juvenile or criminal court) for any allegations or offense charges of abuse and/or neglect of children or adults.
- I have not been convicted of any type of civil or criminal offense (other than minor traffic violations).

While chaperoning, I will be a good Christian example to the students. I agree to follow the guideline above while chaperoning CCS trips and activities. I have fewer than 6 points on my driver's license. My vehicle is in good operating condition with no loose objects. I will carry a first-aid kit on all field trips.

Chaperone/Volunteer Name: _____

Race: _____

Gender: _____

Relationship to student: _____

Signature: _____

FOR DRIVERS ONLY – *if you will be driving students for field trips, etc., this section is required:*

Driver's License Number: _____

Car Insurance Company: _____

Policy Number: _____

Number of Passenger Seatbelts in your Vehicle: _____