



21000 North 75th Ave Glendale, AZ 85308

623-561-2000

www.dreamcityschools.org

DCCS Background Check

Dream City Christian School (DCCS), recognizes that parent volunteers provide valuable assistance to instructional programs, school personnel and student enrichment opportunities. The school encourages volunteer participation in classrooms, events, field trips and various other school activities. Parents and persons volunteering for any purpose with DCCS, will need to complete a Volunteer Background Screening Consent form, or obtain a fingerprint clearance card through AZDPS. Submit the completed background clearance form, or your AZDPS fingerprint clearance card to the school receptionist **two week prior to volunteering**. There is a fee of \$11.00 (cash exact amount or check) for processing the DCCS Background Check form. There is no charge to verify your AZDPS fingerprint card. Clearances must be renewed on a yearly basis. Volunteers may begin once your background clearance is complete and clear of violations. Volunteers will need to sign-in/out in at the school office and receive a volunteer badge, each time volunteering occurs. Thank you for your support of DCCS!



Employees, Volunteers and Board Members

Confidentiality Agreement

Respecting the privacy of our students, staff, volunteers and donors is a basic value of Dream City School (DCCS referenced further). As employees, volunteers, and board members of DCCS, you may be exposed to information which is considered confidential and/or privileged and proprietary in nature. It is the policy of DCCS that such information must be kept confidential both during and after employment, or volunteer services.

“Information” is a very broad term that includes, but not limited to: written documents, emails, technical data, personnel actions, student discipline, as well as, ideas, plans and processes that DCCS uses in its everyday business. You must take measures to properly categorize all DCCS information, that is not for DCCS business only and must not be discussed or disclosed to others without proper authorization. Therefore, care shall also be taken to ensure that unauthorized individuals do not overhear any discussion of confidential information and that documents containing confidential information are not left openly available or inadvertently shared.

Staff and volunteers, including board members, are expected to return materials containing privileged or confidential information at the time of separation from employment or expiration of service.

Unauthorized disclosure of confidential or privileged information is a serious violation of DCCS policy 301: Confidential information and professionalism and will subject the person(s) who made the unauthorized disclosure to appropriate discipline, including removal and/or dismissal.

ACKNOWLEDGEMENT OF CONFIDENTIALITY OF SCHOOL INFORMATION

I have read, Dream City Christian Schools, statement of confidentiality presented above and have reviewed all policies regarding confidential information and professionalism. I agree to abide by the requirements of the policy and inform my supervisor immediately if I believe any violation of the policy has occurred. I understand that violation of this policy will lead to disciplinary action, up to and including termination of employment or services with Dream City Christian School.

Printed Name

Signature

Date

Name of Teacher you would like to volunteer for:



Volunteer Background Screening Consent

I, _____ hereby authorize the Human Resources Representative of Dream City Christian to make an independent investigation of my background, references, character, credit, past employment, education, criminal or police records, and motor vehicle records including those maintained by both public and private organizations and all other public records, for the purpose of confirming the information contained on this Consent Form. I release the HR Representative and/or his/her agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

PLEASE PRINT CLEARLY

Full Name (Printed): _____

Maiden Name or Other Names Used : _____

Male _____ Female _____ Cell Phone: _____

Present Street Address: _____

City: _____ State: _____ Zip: _____

How Long at Present Address: _____ Date of Birth* _____

Social Security Number* _____

Driver's License Number* _____ State: _____

Signature of Volunteer: _____ Date: _____

*NOTE: The above information is required for identification purposes only. Dream City Christian abides by all applicable state and federal employment laws.

The purpose of this background investigation is to ensure the safety of our children, volunteers and staff of Dream City Christian. Thank you for your cooperation and understanding.

THIS FORM IS FOR DREAM CITY CHRISTIAN SCHOOL USE ONLY
21000 N. 75th Ave ~ Glendale, AZ 85308

<u>Office Use Only</u>	
Cash <input type="checkbox"/>	Check <input type="checkbox"/> # _____
Processed by: _____	
Cleared Date: _____	Expiration Date: _____