

**City of Shakopee Affiliated Sports Association Volunteer
Consent for Release of Information**

Please Print
Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Over 18 Years Old? _____ Yes _____ No

Volunteer Position: _____

Name of Association: _____

Starting Date: _____

Supervisor Name: Sherry Dvorak, Recreation Supervisor

Phone: 952-233-9509

Instructions:

Complete this cover sheet and attached consent form and copy of identification to appropriate City Affiliated Association. Association will forward all materials to Shakopee Parks and Recreation, which will retain all original documents. Shakopee Parks and Recreation will notify association of any conflicts.

<p>Date submitted to Police Department: _____</p> <p>Result: _____ Pass _____ Fail Date: _____</p>
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Need copy of drivers license attached.

City of Shakopee Affiliated Sports Association Volunteer Background Check Policy

As the subject of a City of Shakopee and Affiliated Sports Association Volunteer Background Check, you have the following rights:

1. To be informed that that City would request this check for becoming or continuing as a volunteer.
2. To be informed of the response to the background check, to obtain a copy of the background check and to have a chance to respond in the case of negative information.
3. To obtain a copy of any record that forms the basis for the report.
4. To challenge the accuracy and completeness of any information contained in the report.
5. To be informed if the City or Affiliated Association has denied your application or the continuation of your appointment because of the response to the background check.
6. To not be required to pay the cost of the background check.

Data privacy requires that we inform you that you do not need to provide this information, however, if the information is not provided, the City of Shakopee or the Affiliated Association will no longer consider your application for volunteering. Any omission or false representation by your will result in rejection of your application or if not discovered after you are selected, the termination of your appointment to the position.

BACKGROUND CHECK CRIMES (under Minnesota Statutes Chapter 299C & the Minnesota Criminal Code)

Murder – Manslaughter – Felony level Assault – Any Assault crime committed against a minor – Arson – Kidnapping – Criminal Sexual Conduct – Prostitution related Crimes, **OR any of the following Child Abuse Crimes committed against a minor victim, constituting a violation of the following Minnesota Statute Sections:**

- Murder in the 1st degree (609.185, (5))
- Assault in the 1st degree (609.221) – Assault in the 2nd degree (609.222)
- Assault in the 3rd degree (609.223) – Assault in the 5th degree (609.224)
- Solicitation, inducement and promotion of prostitution (609.224)
- Receiving Profit Derived from Prostitution (609.322)
- Other prohibited acts (609.342)
- Criminal Sexual Conduct in the 1st degree (609.342)
- Criminal Sexual Conduct in the 2nd degree (609.343)
- Criminal Sexual Conduct in the 3rd degree (609.344)
- Criminal Sexual Conduct in the 4th degree (609.345)
- Solicitation of Children to Engage in Sexual Conduct (609.353)
- Malicious Punishment of a Child (609.377) – Neglect or Endangerment of a Child (609.378)
- Controlled Substance Crime in the 1st degree (152.021, subd 1, {4})
- Controlled Substance Crime in the 2nd degree (152.022, subd 1, {5 & 6})
- Controlled Substance Crime in the 3rd degree (152.023, subd 1, {3, 4, 5 & 7})
- Controlled Substance Crime in the 4th degree (152.024, subd {2, 3 & 4})

Or any act which constitutes a violation of abuse of maltreatment of a vulnerable adult under sections 609.221 to 609.23 to 609.235, 609.322, 609.242, 609.344, or 609.355 of the Minnesota Criminal Code.