



Partners in Education

# North East Independent School District

8961 TESORO DRIVE, SUITE 402 - SAN ANTONIO, TEXAS 78217  
(210) 804-7226 FAX: (210) 804-7158

Volunteer Number \_\_\_\_\_

## Volunteer Criminal History Record Check

(An online application is available at <https://portal.neisd.net/vchrc/>.)

In order to determine suitability for volunteering and/or mentoring in a school setting, I authorize the North East Independent School District, pursuant to Texas Education Code Section 22.083, to obtain any criminal history record information. I understand that this may include a search of local, state and/or federal law enforcement agency records and hereby expressly release any and all information these agencies may provide. If there is a need for clarification of my identity, I agree to provide additional information, including, but not limited to, photographs and fingerprints.

***PLEASE PRINT ALL INFORMATION LEGIBLY (except signature)***

This application only needs to be completed **once** with NEISD. Active accounts will automatically be resubmitted annually.

NAME: \_\_\_\_\_  
(Last) (First) (Middle)

PRESENT ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip Code)

HOME PHONE: \_\_\_\_\_ OTHER PHONE: \_\_\_\_\_

(Please check) **SEX**  
 Male  
 Female

**ETHNICITY**  
 American Indian/Alaskan Native (I)  
 Asian/Pacific Islander (A)  
 Black (Non-Hispanic) (B)  
 Hispanic (H)  
 White (W)  
 Other (O)

DATE OF BIRTH: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DRIVER'S LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_

THE SCHOOL(S) I WILL VOLUNTEER AT: \_\_\_\_\_  
\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*OFFICIAL USE ONLY BELOW LINE*

DATE CLEARED BY DPS: \_\_\_\_\_ INITIALS: \_\_\_\_\_