



October 8, 2019

The Legislative Bulletin of the School Administrators Coalition  
re: Legislative Update: Screened Volunteers

A number of education-related provisions were debated by the General Assembly last session. Pursuant to Section 168.133 in HB 604, a screened volunteer is "any person who assists a school by providing uncompensated service and who may be left alone with students." Section 168.133 goes on to state that, "the school district shall ensure that a criminal background is conducted for all screened volunteers, who shall complete a criminal background check prior to being alone with a student." And, "volunteers that are not screened shall not be left alone with a student or have access to student records."

Please know that there is no legal requirement for the District to pay for the fingerprint background check and, thus, costs of the fingerprint background check can be passed on to the volunteer.

Thank you for your commitment and time to volunteer for the Pleasant Hill R-III School District.

2019-2020  
FINGERPRINTING INFORMATION FOR  
PLEASANT HILL R-III SCHOOL DISTRICT

Below are the unique registration numbers for the Pleasant Hill R-III School District

ORI: MO921325Z  
DISTRICT CODE: 019148  
VOLUNTEERS: 0382 (uncertified)

Go to: [www.machs.mo.gov](http://www.machs.mo.gov)

Click on the top to register for fingerprinting

Click on the box "click here to register with MACHS"

# is the number listed above relating to your position (volunteer)

Once you have verified your agency information you may begin entering your personal demographic data into the spaces provided

Click "Register"

Write down your Transaction Control Number (TCN)

Click: Complete Registration

Click: I understand and agree

Click "Click here to see map of the fingerprinting sites"

You can click on their location to get more information

( cost of fingerprinting approximately \$45-\$50 )

APPLICATION FOR VOLUNTEERS

SCHOOL YEAR \_\_\_\_\_ NEW \_\_\_\_\_ RETURNING \_\_\_\_\_

(PLEASE PRINT)

BUILDINGS YOU WOULD LIKE TO VOLUNTEER AT-----

\_\_\_\_ PRIMARY (K-2)                      \_\_\_\_ MIDDLE (7-8)

\_\_\_\_ ELEMENTARY (3-4)                \_\_\_\_ HIGH (9-12)

\_\_\_\_ INTERMEDIATE (5-6)

NAME \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DATE APPROVED \_\_\_\_\_ BY \_\_\_\_\_