

# Adult Chaperone Disclosure Form

## Outdoor Environmental Education Programs

Adult chaperones (not high school student assistants) should complete this disclosure form.



Montgomery County Public Schools  
Lathrop E. Smith Environmental Education Center  
5110 Meadowside Lane  
Rockville, Maryland 20855

Mr./Mrs./Ms.: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Please print first, mi, and last name)

Child/Relative Name: \_\_\_\_\_ School: \_\_\_\_\_  
(If applicable)

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

I understand that I must complete a training on **Recognizing, Reporting, and Preventing Child Abuse and Neglect** before serving as an overnight chaperone.

I have read and understand the *Guide to Chaperoning in the Outdoor Education Program* brochure and understand the expectations of volunteering as a chaperone in the outdoor education program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I understand that I must complete a mandatory criminal background check, including fingerprinting.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Current MCPS employees (hired after 1988) and local, state, and federal law enforcement officers are exempt from additional fingerprinting checks. Please sign the statement below to verify your exemption status.

I certify that I am a current MCPS employee (hired after 1988) or an active member of a local, State, or federal law enforcement body that has received a criminal background check as a condition of employment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_