OASIS CHARTER SCHOOLS
CITY OF CAPE CORAL

START HERE. GO EVERYWHERE.

Standard Operating Procedure (SOP)
Volunteer Background Checks
Under Florida Senate Bill 676

1. Purpose

To establish a consistent process for conducting volunteer background screenings in compliance with Florida Senate Bill 676, which requires fingerprint-based background checks for volunteers who may have direct contact with students.

2. Scope

This SOP applies to all school volunteers at Oasis Charter Schools, including but not limited to: unsupervised classroom helpers, field trip chaperones, athletic and club assistants, and any other unpaid individuals working with students.

3. Required Forms

The following forms must be completed as part of the volunteer background check process:

1. Fingerprinting Privacy Policy Acknowledgment Form (FDLE/FBI)
2. Demographic Clearinghouse Screening Form
3. Fieldprint Fingerprinting Scheduling Aide

4. Responsibilities

• **School Administrator or Administrator's Designee**
- Ensures all volunteers are informed of screening requirements.
- Distributes forms and Fieldprint scheduling instructions.
- Collects completed Privacy Policy and Demographic Forms before fingerprinting.

• **Volunteer Applicant**
- Completes and signs required forms.
- Emails completed Privacy Policy and Demographic Forms to **OasisHR@capecoral.gov** prior to fingerprinting appointment.
- Schedules and attends fingerprint appointment through Fieldprint.
- Provides two forms of valid ID at fingerprinting appointment.

239.424.6100
239.541.1039
CapeCharterSchools.org
3519 Oasis Blvd., Cape Coral, FL 33914

• **Human Resources**
- Maintains confidential volunteer screening records.
- Verifies clearance prior to volunteer service.
- Ensures compliance with FDLE, FBI, and Clearinghouse requirements.

5. Procedure

1. **Step 1: Volunteer Registration** – Volunteer completes school volunteer application and is informed of background screening requirements.
2. **Step 2: Distribution of Forms** – Provide applicant with required forms and Volunteer Fieldprint Code.
3. **Step 3: Form Completion** – Volunteer completes, and signs required forms; and emails them to OasisHR@capecoral.gov .
4. **Step 4: Fingerprint Appointment Scheduling** – Volunteer registers at www.fieldprintflorida.com, enters Fieldprint code, FPCityCapeCoralChSchAuthVol088 and schedules appointment.
5. **Step 5: Fingerprinting Appointment** – Volunteer brings two forms of ID and confirmation page; fingerprints and photograph are taken.
6. **Step 6: Background Screening & Clearinghouse Entry** – FDLE/FBI results uploaded; HR monitors clearance. HR shares volunteer clearance status with buildings via a shared spreadsheet.
7. **Step 7: Clearance Notification** – Once cleared, volunteer may begin service; flagged records handled per FDLE/FBI guidelines.

6. Recordkeeping (Human Resources)

• Signed Privacy Policy and Demographic Forms kept on file in the Human Resources office.
• Clearinghouse clearance confirmation documented in volunteer records.
• Records maintained for a minimum of five (5) years or per state retention schedule.

7. Compliance & Confidentiality

• No volunteer may begin work without documented clearance.
• All screening results are confidential and shared only on a need-to-know basis.
• Volunteers have the right to challenge inaccurate records through FDLE/FBI procedures.

8. Fieldprint Codes – Oasis Charter Schools

• Volunteer: FPCityCapeCoralChSchAuthVol088

239.424.6100
239.541.1039
CapeCharterSchools.org
3519 Oasis Blvd., Cape Coral, FL 33914

OASIS CHARTER SCHOOLS
CITY OF CAPE CORAL

START HERE. GO EVERYWHERE.

Parent Volunteers

Florida Senate Bill 676 (SB 676) – Volunteer Background Checks

---

Required:

Florida Senate Bill 676 requires **all school volunteers who work directly with students** to complete a **Level 2 Background Screening**.

What is a Level 2 Screening?

- **Fingerprint-based check**
- Searches **state and national criminal history databases**
- Includes **sexual predator/offender registries** for all states lived in during the past 5 years

---

Key Details

- **Validity:** Level 2 clearance and ID badge are valid for **5 years**
- **Applies To:**
  - Parent/guardian volunteers
  - Athletic coaches
  - School staff and contractors with direct student contact
- **Cost:** Approximately **$84** (set by state law; may vary slightly by provider)

Why This Matters

SB 676 was passed to **increase student safety** and ensure that all individuals working or volunteering in schools undergo the **same high standard of screening**.

Thank you for your commitment to keeping our schools safe!

Your time and dedication make a difference in the lives of our students.

239.424.6100
239.541.1039
CapeCharterSchools.org
3519 Oasis Blvd., Cape Coral, FL 33914

Care Provider Background Screening Clearinghouse
Background Screening Request Form

You have applied for a position with a health care and/or service provider regulated by a specified agency in the Care Provider Background Screening Clearinghouse (Clearinghouse) that requires a fingerprint-based background check. As a health care and/or service provider regulated by a specified agency in the Clearinghouse we may conduct a search for an existing background screening result or submit a new background screening request through the Clearinghouse results website on your behalf.

In order to complete the search and/or background screening request we must collect the following information. This information is required by the Clearinghouse, the Florida Department of Law Enforcement, and the Federal Bureau of Investigation.

Please provide the following information:

Applicant Information

***First Name:** _____

Middle Name: _____

***Last Name:** _____

Aliases: _____

***SSN:** _____

*Date of Birth: _____

*Place of Birth: _____

Demographics

*Sex: _____

*Race: _____

*Hair Color: _____

*Eye Color: _____

*Height: _____

*Weight: _____

Contact Information

*Address Line 1: _____

Address Line 2: _____

*City: _____

*State: _____

*Zip: _____

County _____

Prior States: _____

Email: _____

Phone: _____

***Please indicate which school(s) you will be working or volunteering at:**

☐Oasis Elementary North

☐Oasis Elementary South

☐Oasis Middle School

☐Oasis High School

*Denotes Required Fields

PRIVACY POLICY ACKNOWLEDGEMENT FORM

I acknowledge that I have received a copy of the privacy policies from the Florida Department of Law Enforcement and the Federal Bureau of Investigation, which describe the exchange of information where criminal record results will become part of the Care Provider Background Screening Clearinghouse.

I understand and agree that I will read and comply with the guidelines contained in the privacy policies.

_____

Employee/Contractor Name (Printed)

_____

Employee/Contractor Signature

_____

Date

FLORIDA DEPARTMENT OF LAW ENFORCEMENT

NOTICE FOR APPLICANTS SUBMITTING FINGERPRINTS WHERE CRIMINAL RECORD RESULTS WILL BECOME PART OF THE CARE PROVIDER BACKGROUND SCREENING CLEARINGHOUSE

NOTICE OF:

- **SHARING OF CRIMINAL HISTORY RECORD INFORMATION WITH SPECIFIED AGENCIES,**
- **RETENTION OF FINGERPRINTS,**
- **PRIVACY POLICY, AND**
- **RIGHT TO CHALLENGE AN INCORRECT CRIMINAL HISTORY RECORD**

This notice is to inform you that when you submit a set of fingerprints to the Florida Department of Law Enforcement (FDLE) for the purpose of conducting a search for any Florida and national criminal history records that may pertain to you, the results of that search will be returned to the Care Provider Background Screening Clearinghouse. By submitting fingerprints, you are authorizing the dissemination of any state and national criminal history record that may pertain to you to the Specified Agency or Agencies from which you are seeking approval to be employed, licensed, work under contract, or to serve as a volunteer, pursuant to the National Child Protection Act of 1993, as amended, and Section 943.0542, Florida Statutes. "Specified agency" means the Department of Health, the Department of Children and Family Services, the Division of Vocational Rehabilitation within the Department of Education, the Agency for Health Care Administration, the Department of Elder Affairs, the Department of Juvenile Justice, and the Agency for Persons with Disabilities when these agencies are conducting state and national criminal history background screening on persons who provide care for children or persons who are elderly or disabled. The fingerprints submitted will be retained by FDLE and the Clearinghouse will be notified if FDLE receives Florida arrest information on you.

Your Social Security Number (SSN) is needed to keep records accurate because other people may have the same name and birth date. Disclosure of your SSN is imperative for the performance of the Clearinghouse agencies' duties in distinguishing your identity from that of other persons whose identification information may be the same as or similar to yours.

Licensing and employing agencies are allowed to release a copy of the state and national criminal record information to a person who requests a copy of his or her own record if the identification of the record was based on submission of the person's fingerprints. Therefore, if you wish to review your record, you may request that the agency that is screening the record provide you with a copy. After you have reviewed the criminal history record, if you believe it is incomplete or inaccurate, you may conduct a personal review as provided in s. 943.056, F.S., and Rule 11C8.001, F.A.C. If national information is believed to be in error, the FBI should be contacted at 304-625-2000. You can receive any national criminal history record that may pertain to you directly from the FBI, pursuant to 28 CFR Sections 16.30-16.34. You have the right to obtain a prompt determination as to the validity of your challenge before a final decision is made about your status as an employee, volunteer, contractor, or subcontractor.

Until the criminal history background check is completed, you may be denied unsupervised access to children, the elderly, or persons with disabilities.

The FBI's Privacy Statement follows on a separate page and contains additional information.

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

See Page 2 for Spanish translation.

Declaración de la Ley de Privacidad

Esta declaración de la ley de privacidad se encuentra al dorso del FD-258 tarjeta de huellas digitales.

Autoridad: La adquisición, preservación, e intercambio de huellas digitales e información relevante por el FBI es autorizada en general bajo la 28 U.S.C. 534. Dependiendo de la naturaleza de su solicitud, la autoridad incluye estatutos federales, estatutos estatales de acuerdo con la Pub. L. 92-544, Órdenes Ejecutivas Presidenciales, y reglamentos federales. El proveer sus huellas digitales e información relevante es voluntario; sin embargo, la falta de hacerlo podría afectar la terminación o aprobación de su solicitud.

Propósito Principal: Ciertas determinaciones, tal como empleo, licencias, y autorizaciones de seguridad, podrían depender de las investigaciones de antecedentes basados en huellas digitales. Se les podría proveer sus huellas digitales e información relevante/ biométrica a la agencia empleadora, investigadora, o responsable de alguna manera, y/o al FBI con el propósito de comparar sus huellas digitales con otras huellas digitales encontradas en el sistema Next Generation Identification (NGI) del FBI, o su sistema sucesor (incluyendo los depósitos de huellas digitales latentes, criminales, y civiles) u otros registros disponibles de la agencia empleadora, investigadora, o responsable de alguna manera. El FBI podría retener sus huellas digitales e información relevante/biométrica en el NGI después de terminar esta solicitud y, mientras las mantengan, sus huellas digitales podrían continuar siendo comparadas con otras huellas digitales presentadas a o mantenidas por el NGI.

Usos Rutinarios: Durante el procesamiento de esta solicitud y mientras que sus huellas digitales e información relevante/biométrica permanezcan en el NGI, se podría divulgar su información de acuerdo a su consentimiento, y se podría divulgar sin su consentimiento de acuerdo a lo permitido por la Ley de Privacidad de 1974 y todos los Usos Rutinarios aplicables según puedan ser publicados en el Registro Federal, incluyendo los Usos Rutinarios para el sistema NGI y los Usos Rutinarios Generales del FBI. Los usos rutinarios incluyen, pero no se limitan a divulgación a: agencias empleadoras gubernamentales y no gubernamentales autorizadas responsables por emplear, contratar, licenciar, autorizaciones de seguridad, y otras determinaciones de aptitud; agencias de la ley locales, estatales, tribales, o federales; agencies de justicia penal; y agencias responsables por la seguridad nacional o seguridad pública.

A partir de 30/03/2018

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing.[1] These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- **You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.[2]**
- **You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.**
- **You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).**
- **If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.**
- **If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.**
- **If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)**
- **You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.[3]**

---

[1] Written notification includes electronic notification, but excludes oral notification.

[2] https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

[3] See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

DERECHOS DE PRIVACIDAD DE SOLICITANTES - JUSTICIA, NO CRIMINAL

Como solicitante sujeto a una indagación nacional de antecedentes criminales basado en huellas dactilares, para un propósito no criminal (tal como una solicitud para empleo o una licencia, un propósito de inmigración o naturalización, autorización de seguridad, o adopción), usted tiene ciertos derechos que se entablan a continuación. Toda notificación se le debe proveer por escrito.[1] Estas obligaciones son de acuerdo al Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, y Title 28 Code of Federal Regulations (CFR), 50.12, entre otras autorizaciones.

- **Se le debe proveer una Declaración de la Ley de Privacidad del FBI (con fecha de 2013 o más reciente) por escrito cuando presente sus huellas digitales e información personal relacionada. La Declaración de la Ley de Privacidad debe explicar la autorización para tomar sus huellas digitales e información relacionada y si se investigarán, compartirán, o retendrán sus huellas digitales e información relacionada.[2]**
- **Se le debe notificar por escrito el proceso para obtener un cambio, corrección, o actualización de su historial criminal del FBI según delineado en el 28 CFR 16.34.**
- **Se le tiene que proveer una oportunidad de completar o disputar la exactitud de la información contenida en su historial criminal del FBI (si tiene dicho historial).**
- **Si tiene un historial criminal, se le debe dar un tiempo razonable para corregir o completar el historial (o para rechazar hacerlo) antes de que los funcionarios le nieguen el empleo, licencia, u otro beneficio basado en la información contenida en su historial criminal del FBI.**
- **Si lo permite la política de la agencia, el funcionario le podría otorgar una copia de su historial criminal del FBI para repasarlo y posiblemente cuestionarlo. Si la política de la agencia no permite que se le provea una copia del historial, usted puede obtener una copia del historial presentando sus huellas digitales y una tarifa al FBI. Puede obtener información referente a este proceso en https://www.fbi.gov/services/cjis/identity-history-summary-checks y https://www.edo.cjis.gov.**
- **Si decide cuestionar la veracidad o totalidad de su historial criminal del FBI, deberá presentar sus preguntas a la agencia que contribuyó la información cuestionada al FBI. Alternativamente, puede enviar sus preguntas directamente al FBI presentando un petición por medio de .https://www.edo.cjis.gov. El FBI luego enviará su petición a la agencia que contribuyó la información cuestionada, y solicitará que la agencia verifique o corrija la información cuestionada. Al recibir un comunicado oficial de esa agencia, el FBI hará cualquier cambio/corrección necesaria a su historial de acuerdo con la información proveída por la agencia. (Vea 28 CFR 16.30 al 16.34.)**
- **Usted tiene el derecho de esperar que los funcionarios que reciban los resultados de la investigación de su historial criminal lo usarán para los propósitos autorizados y que no los retendrán o diseminarán en violación a los estatutos, normas u órdenes ejecutivos federales, o reglas, procedimientos o normas establecidas por el National Crime Prevention and Privacy Compact Council.[3]**

---

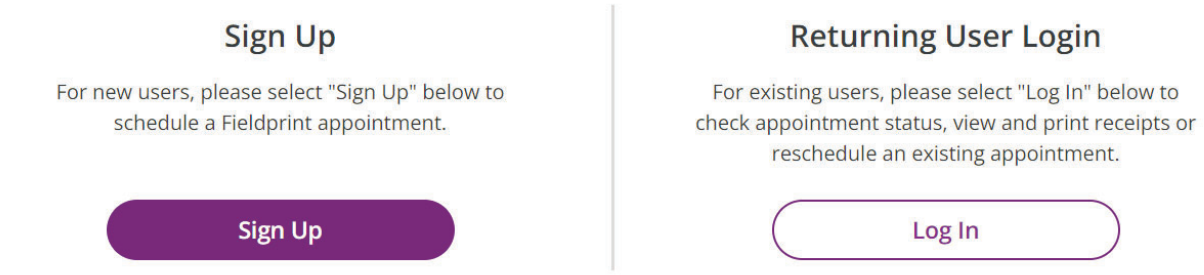
1 La notificación por escrito incluye la notificación electrónica, pero excluye la notificación verbal.

2 https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

3 Vea 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (anteriormente citada como 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) y 906.2(d).

To schedule a fingerprinting appointment, please follow these simple instructions:

1. Visit www.fieldprintflorida.com
2. Click on the “Schedule an Appointment” button.



For New Users:

3. **Sign Up** as a New User (if you have never used our services before). ***Returning users can skip to Step 7.***
4. **Review and Agree** to the E-SIGN Act Disclosure and Consent
    - Select “I Agree” to proceed or follow the “do not agree” instructions if applicable.
5. **Create Your Account** by completing the required fields and selecting security questions. Then, click “Continue.”
6. **Verify Your Account:** You will receive an 8-digit verification code via email. Enter it on the “Verify Account” page and select “Complete Registration.”

For Returning Users:

7. Log in with your Username and Password.
    - If you need assistance logging in please call our applicant service team at 877-614-4364, options 2, then 3, then 3.
8. Answer Your Security Question and click “Continue.”

Steps to Schedule Your Appointment:

9. **Enter the Fieldprint Code** provided by your employer, then click “Continue.”
    - If you do not have this code, contact your employer. Fieldprint cannot provide it directly.

Reason

A Fieldprint Code is required to continue. If you do not have a Fieldprint Code, please contact the employer or organization that directed you to this website.

Fieldprint Code* FPCityCapeCoralChSchAuthVol088

Continue

10. **Enter Your Contact and Demographic Information** as required by the FBI and schedule your fingerprint appointment at your preferred location.
11. **Print or Save Your Confirmation Page** and bring it to your appointment, along with two forms of identification.

Important Reminder:

AHCA requires a digital photograph to be taken during fingerprinting. Unless it is for a religious or medical purpose, please do not have anything covering your hair, or face.

If you have any questions or problems, contact our applicant service team at 877-614-4364 (options 2, then 3, then 3) or email customerservice@fieldprint.com.

Services Required	Fieldprint Code to use
SCHOOL EMPLOYMENT	*FPCityCapeCoralChSchAuthEmp088*
VOLUNTEER	*FPCityCapeCoralChSchAuthVol088*
TEACHER CERTIFCATION	*FPCityCapeCoralChSchAuthTchCert088*
CONTRACTOR / VENDOR	*FPCityCapeCoralChSchAuthContVend088*