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

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- **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; coordinator collects and emails them to OasisHR@capecoral.gov. Once emailed, coordinator shreds volunteer forms with personal information.
4. **Step 4: Fingerprint Appointment Scheduling** – Volunteer registers at www.fieldprintflorida.com, enters Fieldprint code, 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**

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Attention Parent Volunteers

Important Update: Florida Senate Bill 676 (SB 676) – Volunteer Background Checks

What's Changing?

Florida Senate Bill 676 now 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.

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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: _____

*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



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

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

Sign Up
For new users, please select "Sign Up" below to schedule a Fieldprint appointment.

Sign Up

Returning User Login
For existing users, please select "Log In" below to check appointment status, view and print receipts or reschedule an existing appointment.

Log In

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	<i>FPCityCapeCoralChSchAuthEmp088</i>
VOLUNTEER	<i>FPCityCapeCoralChSchAuthVol088</i>
TEACHER CERTIFICATION	<i>FPCityCapeCoralChSchAuthTchCert088</i>
CONTRACTOR / VENDOR	<i>FPCityCapeCoralChSchAuthContVend088</i>