



Chicago Methodist  
Senior Services

## Minor Volunteer Screening Consent Form

As a parent or guardian of the individual volunteer, \_\_\_\_\_, who is younger than the age of 17, I give my consent for this named individual to have volunteer screenings.

Chicago Methodist Senior Services requires screenings that consist of background check, drug testing and a tuberculosis skin test (Mantoux PPD).

A second Tuberculosis skin test shall be administered within one to three weeks if the reaction to the first test is negative. Volunteers with a positive skin test will be required to get a chest x-ray. Chest x-rays cannot be used as a substitute for the TB skin test. Individuals that have chest x-ray results prior to volunteering (chest x-ray results must be within 9 months) must provide documentation/proof of previous positive TB skin test results. Individuals who are not able to provide proof will have to get a TB skin test administered.

### **“PRECAUTION”**

**Persons with known skin sensitivity may experience some bruising at the test site. Itching and some minor discomfort at the test site may also occur. This should only be temporary. If you are pregnant, this test shall be administered under care of a physician.**

Please check this box and sign or type below if you have read the above requirements and consent to the above screenings to be completed as required by Chicago Methodist Senior Services.

\_\_\_\_\_  
Volunteer Name (Print in ink or Type)

\_\_\_\_\_  
Volunteer Signature (Sign in ink or Type)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name (Print in ink or Type)

\_\_\_\_\_  
Parent/Guardian Signature (Sign in ink or Print)

\_\_\_\_\_  
Date