**Bruneau-Grand View Joint School District #365**

**COMMUNITY RELATIONS 4600F1**

**Bruneau-Grand View Joint School District #365**

**Volunteer Application**

Thank you for your interest in serving as a school volunteer. The application procedure helps us to provide the safest environment for our students. Prior to completing the volunteer application it is required that you read the District’s policy regarding volunteers. A criminal history/ fingerprint check will be obtained. The school’s volunteer coordinator will contact you upon the application process being completed.

Personal Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Last Name: |  |  | First Name: |  |
| Social Security Number: |  |  | Date of Birth: |  |
| City of Birth: |  |  | State of Birth: |  |
| Gender: |  |  | Race: |  |
| Home Phone: | ( ) |  | Business Phone: | ( ) |
| Home Address: |  |
| City |  |  | State: |  |
| Zip: |  |  |  |  |

School Selection

1. List all schools where you will volunteer:

2. If you have children attending those schools, list the child’s name, grade, and school:

Child’s First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Child Attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Child Attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Child Attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Availability

I am available at the following times:

 Morning Afternoon

Monday ⁬ ⁬

Tuesday ⁬ ⁬

Wednesday ⁬ ⁬

Thursday ⁬ ⁬

Friday ⁬ ⁬

Education Information

Highest Level of Education Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Information

Current Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years with Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Past Volunteer Experience

Name of Organization:

Contact Name:

Address:

Can we contact your supervisor? Yes ⁬ No ⁬

Name of Supervisor & Supervisor’s Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When did you volunteer? From: To:

References

List two references who have known you for at least one year and are not related to you. Please notify your references to expect us to contact them.

Name # 1: Name # 2:

Phone: Phone: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Relationship: Relationship:

Email: Email:

Background Security Information

To safeguard the children we serve, Bruneau-Grand View Joint School District screens volunteer applicants. All information is confidential and will not be shared.

Yes ⁬ No ⁬ I will cooperate with the Bruneau-Grand View Joint School District in obtaining a fingerprint background check.

Yes ⁬ No ⁬ Have you ever been convicted of a felony? If yes, explain:

Yes ⁬ No ⁬ Have you ever committed any criminal offenses against a minor?

Yes ⁬ No ⁬ Have you ever been arrested, found guilty, entered a plea of no contest or had adjudication withheld in a criminal offense other than a minor traffic violation?

Statement of Understanding & Signature (Required)

I have read the District’s policy and procedure regarding volunteers. I fully understand the policy and procedure and agree to abide by them.

I affirm that all of my responses are true, complete, and correct to the best of my knowledge and are made in good faith. In addition, I certify that I have reviewed the above criminal history information and responded truthfully. I understand that all involvement with students is restricted to approved school activities. In exchange for the benefit I receive from being allowed to volunteer within the Bruneau-Grand View Joint School District I agree to indemnify Bruneau-Grand View Joint School District from any and all responsibility of liability that they may incur as a result of volunteering my services to the District.

Signature

Name Printed Date