

SUNAPEE VOLUNTEER APPLICATION

PLEASE PRINT OR TYPE ALL INFORMATION

THE SUNAPEE SCHOOL DISTRICT DOES NOT DISCRIMINATE IN THE OPERATION OF ITS EDUCATIONAL AND EMPLOYMENT POLICIES AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION.

Volunteer Position: _____

Full Name _____ Female Male (circle one)
Last First MI

Alias/Maiden Name(s) _____

Home Address _____

Mailing Address _____

(If Different) _____

Home Phone: _____ Work/Cell Phone: _____ DOB: _____

ID Verification: Please attach a copy of your driver's license or other Identification with name & birth date.

BACKGROUND:

Have you ever been charged with or investigated for sexual abuse or harassment of another person?

Yes ___ No ___

Have you ever been convicted of any offense that involved drugs/alcohol?

Yes ___ No ___

Have you ever been convicted of a crime (other than a minor traffic offense)?

Yes ___ No ___

If you have answered YES to any of the previous questions, provide full details below, including, with respect to court actions, the date, offense in question, and the address of the court involved. Use additional sheets if necessary.

Conviction or other disposition of a crime is not necessarily an automatic bar to volunteer.

My signature below constitutes authorization to check my criminal records, and release of investigatory information possessed by any state, local or federal agency. I further authorize those persons, agencies or entities that the Sunapee School District contacts in connection with my volunteer application to fully provide the Sunapee School District any information on the matters set forth above. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the Sunapee School District its agents and officials or against any provider of such information.

I understand that information submitted in and with this application may be disclosed to a screening committee, which may include board members, administrators. I give my consent to this disclosure. Any volunteer offer by Sunapee School District is contingent upon satisfactory criminal background report of the applicant. **I am aware that I will receive no compensation for my services.**

Signature/Date

Note: All application materials become the property of Sunapee School District. None will be returned.

VOLUNTEERS – CONFIDENTIALITY AGREEMENT

Volunteer Confidentiality Agreement

While performing volunteer services for the Sunapee School District, I understand that I am bound by laws and policies which protect the privacy of student information I am given access to. I agree to keep this information in the strictest confidence and recognize that the failure to do so may result in my being denied the opportunity to volunteer.

Signature of Volunteer

Date

Signature of District Designee
(Principal, Superintendent, etc.)

Date

OFFICE USE ONLY:

Administrator: Please select one.

_____ This Volunteer may be alone with students. Fingerprint approval required.

_____ This Volunteer **will not** be alone with students. No fingerprint approval required

Cross Reference: IJOC – School Volunteers

First Reading: December 4, 2013

Second Reading & Approval: January 15, 2014