

VOLUNTEER APPLICATION FORM

~MUST BE SIGNED BY THE PRINCIPAL AND PROVIDED TO HR AT THE TIME OF FINGERPRINTING~

It is requested volunteers complete a background check at least one week prior to the field trip

Volunteers must complete the Code of Conduct training and Signature form before fingerprinting or volunteering

Name _____ Phone #: _____
First M Last

Address _____ City _____ Zip Code _____

School location you will volunteer for: _____ Date: _____

Do you have children or relatives who attend the school where you will be volunteering? Yes No
 If yes, will you be volunteering only in the classroom of your child/relative? Yes No

Box 1	Which classroom teacher will you be volunteering for? <input type="checkbox"/> Classroom Teacher Name: _____ <input type="checkbox"/> *Field Trip – Date of Field Trip _____
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Box 2	Please answer the following questions: a. Have you ever been convicted of a violation of law other than a minor traffic violation?..... Yes <input type="checkbox"/> No <input type="checkbox"/> b. Have you ever pleaded guilty and had your guilty plea held in abeyance in a criminal proceeding?..... Yes <input type="checkbox"/> No <input type="checkbox"/> c. Have you ever been placed on probation in conjunction with a criminal charge or conviction?..... Yes <input type="checkbox"/> No <input type="checkbox"/> d. Are any criminal charges or proceedings pending against you?..... Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If you have answered yes to any of the above, provide a statement explaining the circumstances to Human Resources.</i>
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Box 3	In the last three (3) years, have you worked in a PAID position where you were required to directly care for, supervise, control or have custody of a child? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide the following information: Company Name _____ Supervisor Name _____ Supervisor Phone # _____ Supervisor Email _____
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AGREEMENT (Utah Code 53A-15-1511)

I certify that the answers given are true and correct to the best of my knowledge. I authorize Jordan School District to make such investigations and inquiries of my personal employment, and other related matters, as may be necessary in arriving at a decision. I authorize the Jordan School District to contact my current/most recent qualifying employer(s) requesting information regarding any employment action taken or discipline imposed against me for the physical or sexual abuse of a child or student and agree to hold harmless said employer(s) for good faith disclosure of requested information. In accordance with Utah State law, Jordan School District may conduct a criminal background check and I hereby waive my rights to further written notice of such. I understand that false or misleading information I provide on this document or in interview(s) may result in denial of volunteer opportunities. I understand, also, that I am required to abide by all rules and regulations of the Jordan School District.

I agree that all the work I perform will be non-compensable. I am aware this volunteer position will be providing support services to students and/or Jordan School District and I hereby declare I am able to perform the duties without endangering myself or others. I hereby release and hold harmless Jordan School District, its officials, employees, agents and insurers from any and all liabilities in connection with or arising out of my volunteering. As a volunteer, I agree to dress appropriately.

Signature of Volunteer

Date

* If this volunteer will not have "Significant Unsupervised Access" to students, maintain a copy of this form in your school file only.

Under my direction, the above listed volunteer will have "Significant Unsupervised Access" to students within my school. If the volunteer is a new volunteer at my school and answered "Yes" in Box 3, I am required by Utah Code to attempt to contact his/her supervisor to verify the following reference information: "Has this person had any employment action taken, or discipline imposed against him/her, for the physical or sexual abuse of a child or student?" Yes No If yes, details are listed: _____

If yes, the volunteer will not be allowed unsupervised access to students until a background check is cleared by Human Resources.

Reference by _____ . Contacted _____ by (Email/Phone) on _____. Status: Message/Complete
Name of Employee checking reference Person contacted Circle one Date Contacted Circle One

I verify this volunteer has completed the Code of Conduct training and has submitted the Signature Form to our school.

Signature of Principal

Date

THIS VOLUNTEER APPLICATION MUST BE RENEWED ANNUALLY