

**SCHOOL DISTRICT NO. 50
4405-01 VOLUNTEER APPLICATION**

School Year: _____ (must be completed each school year)

Name: _____

Address: _____

Phone: _____

I have a child in this school: Yes - (name/s)

 No

Areas of Expertise and Interest:

- | | |
|--|--|
| <input type="checkbox"/> <input type="checkbox"/> Tutoring (subject/s) _____ | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> <input type="checkbox"/> Driving | <input type="checkbox"/> Food Days |
| <input type="checkbox"/> <input type="checkbox"/> Field Trips | <input type="checkbox"/> <input type="checkbox"/> Library |
| <input type="checkbox"/> <input type="checkbox"/> Coaching - (sports) _____ | <input type="checkbox"/> <input type="checkbox"/> Office Help |
| <input type="checkbox"/> <input type="checkbox"/> Special Events | <input type="checkbox"/> <input type="checkbox"/> Classroom Help |
| <input type="checkbox"/> <input type="checkbox"/> Other: | |

Times available: _____

I agree to a reference check and/or criminal record search, as the Administrator of the school deems necessary.

I can provide two references:

1. Name: _____ Contact #: _____

2. Name: _____ Contact #: _____

I have already had a Criminal Record Check done at the following School District school as noted: _____

I have never been convicted of an offense involving children, violence, or illegal substances.

I have never been refused permission to volunteer previously.

Applicant Signature: _____

For Office Use Only

Approved

Not Approved - (reason):

Principal's Signature _____