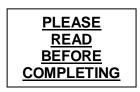


Alachua County Public Schools **Application to Volunteer**





School Volunteer Programs 2802 NE 8 Avenue Gainesville, FL 32641 352-955-7250, ext. 252-Phone 844-828-3505-Fax

We are delighted to process this application to volunteer with the *Alachua County Public Schools*. Please complete this application accurately and completely. **Be aware that a check of the FDLE Sexual Predator web site will be performed.** We do this to comply with state law and to maximize the safety of our students. You may submit this application to the school of your choice or to the district office at the address above for processing. You must fill out a new application each year. Thank you for offering your time, talents and skills to enhance the education of our students.

| Please Type or Print School Volunteering In: | | |
|--|----------------------------------|------------------------------|
| ☐ Female ☐ Male Date of Birth: | | |
| Month/Day/Year | | |
| Name: | First | Middle |
| Mailing Address: | 1 1130 | Middle |
| Stroot | City | State (Abr.) Zip |
| Phone: Home Work | Email: | Yes 🗌 No |
| | | School Board Employee |
| Indicate your age group: Under 21 21-61 | | |
| Occupation: | Employer: | |
| Racial Category: White, Non-Hispanic 🗌 Black, Non-Hispanic 🗌 Hispanic 🗌 Asian 🗌 Multiracial 🗌 Native American 🗌 | | |
| I have been a volunteer for years. | | |
| Emergency contact: | Phone: | |
| Have you ever been convicted, found guilty, entered a plea of nolo contendere (no contest), entered into a deferred prosecution or | | |
| pre-trial diversion agreement, or had adjudication withheld in a criminal offense other than a minor traffic violation? (DUI is not a | | |
| minor traffic violation.) Are there any criminal charges now pending against you? Sealed or expunged records must be reported. | | |
| → PLEASE CHECK ONE: YES NO A "NO" check means "NO" to every statement above. | | |
| County & State Arrested: Dates(s): | | |
| Nature of Charges: | | rges: |
| Disposition: | | |
| If YES, district and principal approval will be required \(\sigma\) Approved \(\sigma\) Not Approved, Principal | | |
| | | |
| By signing, I agree to abide by the policies and/or procedures of the Alachua County Public Schools Volunteer Program, | | |
| and of the individual school in which I serve. I understand that the program reserves the right not to place me or to discontinue the use of my services as a volunteer. | | |
| discontinue the use of my services as a voidificer. | | |
| → VOLUNTEER APPLICANT SIGNATURE _ | | Date: |
| | | |
| I am interested in the following volunteer pl | | Mentoring Programs* ☐ BB/BS |
| ☐ After School Gators ☐ Clinic ☐ Athletic Coach ☐ EDEP | ☐ Parent Academy ☐ SAC | ☐ CHAMPS |
| | ional Ed. (ESE) Speaker's Bureau | □ NPPC Mentor |
| | Grandparent Subject: | _ ☐ Parent Emissary Mentors |
| ☐ Classroom ☐ Media | | ☐ Take Stock in Children |
| | TSA/PTO | |
| I am available: M□ T□ W□ Th□ F□ Tim | | Other: |
| List career/volunteer experiences, talents, skills or hobbies: (X) only if enrolled | | |
| Do you have children attending this school? Yes No Relationship to child: Mother Father Grandparent Other | | |
| | | |
| Teacher(s)/Grade(s): | | |
| ☐ I am a student at: If volunteering for a class requirement, indicate the following. | | |
| Professor's Name: Course #: Total Hours Required: | | |
| OFFICIAL USE ONLY: Law Enforcement Background Check: Date: Confirmed by: | | |
| Orientation Date: Placement: Placement: Confirmed by | | |
| Chomation Date i lacement. | • | |

VOL Revised Date: 7/13/16