

**ONTEORA CENTRAL SCHOOL DISTRICT**  
**BOICEVILLE, NY 12412**

**“Excellence in Education”**  
**Volunteer Application**

Volunteering for: \_\_\_\_\_ Level: \_\_\_\_\_  
(Ex: presenter, classroom helper, (Ex: elementary, middle, high school)  
etc.)

**Personal Information**

(Please provide a photo identification with application.)

Name: \_\_\_\_\_  
Last First Middle

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

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

Telephone Number: \_\_\_\_\_

In case of emergency, contact:  
name: \_\_\_\_\_ relationship: \_\_\_\_\_ phone: \_\_\_\_\_

Are you a parent, guardian or caretaker for a child in the Onteora Central School District?  yes  no

If yes, please list student/teacher name(s):

\_\_\_\_\_  
\_\_\_\_\_

If you do not have a child currently enrolled in an Onteora school, are you volunteering as part of a community organization or business member?  yes  no

If yes, please list name of organization:

\_\_\_\_\_

Have you ever been fingerprinted to work or volunteer in a school district?  yes  no

**Reminder: you must always disclose criminal information.**

Have you ever been convicted of a drug or sexual related offense or an act of violence?  yes  no

Have you ever been listed on a sex offender registry, either in New York State or another jurisdiction?  yes  no

If yes to any of the above, please explain the type(s) of offense(s), location(s) and date(s) in the space below. Attach an additional sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ Note: Any applicant on an active “Wanted List”  
(registered sex offender, terrorist list, etc.) **WILL NOT BE ALLOWED TO VOLUNTEER AT ONTEORA  
CENTRAL SCHOOL DISTRICT.**

**Please complete the back of this application →**

**Related Experience**

Dates	Name of Agency	Nature of Experience	Total Years	Reference/Phone #

**Optional Statement/Additional Information**


**Please read carefully before signing:**

Volunteers must be supervised by a teacher or administrator while working with students. Volunteers working with students over 30 hours need to be fingerprinted as per New York State regulations.

Onteora Central School District is an equal opportunity employer. Applicants are considered for all positions without regard to race, color, religion, sex, sexual orientation, national origin, age, marital or veteran status, the presence of a non-job related medical condition of handicap, or other legally protected status. Any concerns regarding discrimination should be directed to the District’s Title IX Compliance Officer or to the US Department of Education, Office of Civil Rights.

*I affirm that all the information I have provided in this application is true and complete to the best of my knowledge. I understand that Onteora Central School District reserves the right to verify all information on this application form and that any false statements or failure to disclose information may be sufficient to disqualify me as a volunteer. I hereby authorize OCSD to obtain information relating to my current and/or previous employment, education, and personal history records.*

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**VOLUNTEER POLICY # 3160:**

The Board recognizes the need to develop a school volunteer program to support District instructional programs and extracurricular activities. The purpose of the volunteer program will be to:

- a) Assist employees in providing more individualization and enrichment of instruction;
- b) Build an understanding of school programs among interested citizens, thus stimulating widespread involvement in a total educational process;
- c) Strengthen school/community relations through positive participation. Volunteers are persons who are willing to donate their time and energies to assist Principals, teachers, and other school personnel in implementing various phases of school programs. Volunteers shall serve in that capacity without compensation or employee benefits except for liability protection under the District's insurance program.

An application shall be filled out by each prospective volunteer and forwarded to the District Office for evaluation. The Building Principal will forward his/her decisions concerning selection, placement and replacement of volunteers to the Superintendent for final evaluation. Following approval from the Superintendent of Schools, volunteers selected for work in the District shall be placed on the list of approved volunteers. However, the Superintendent retains the right to approve or reject any volunteer applications submitted for consideration. Administrative regulations will be developed to implement the terms of this policy.

**OFFICIAL USE ONLY:**

Date: \_\_\_\_\_

Picture ID Check: \_\_\_\_\_

Notes:

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**Approved:** \_\_\_\_\_

**Not Approved:** \_\_\_\_\_

Signature: \_\_\_\_\_  
Principal's Name

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
Superintendent's Name

Date: \_\_\_\_\_