



**Hanford Elementary School District
School Volunteer Registration**

New Volunteer
 Previous Volunteer
 HESD Employee

All school volunteers must complete this registration form to volunteer. Please **PRINT** legibly and complete the **entire** registration. Use your **name as it appears on your photo ID and present it for verification**. A complete application with an original signature must be kept on file. **State Law requires a TB clearance for anyone working on a regular basis with children.**

| | | | |
|----------------------------|----------------------------------|--|--------------|
| LAST NAME | FIRST NAME | MI | MAIDEN/AKA'S |
| STREET ADDRESS | CITY | STATE | ZIP CODE |
| HOME/CELL PHONE# | WORK PHONE# | EMAIL ADDRESS: | |
| DRIVER LICENSE# | DATE OF BIRTH: | <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | |
| BUSINESS/ORG. REPRESENTED: | SCHOOL WHERE YOU WILL VOLUNTEER: | SCHOOL YEAR: | |

DO YOU HAVE A CHILD ATTENDING THIS SCHOOL? YES NO

IS THIS THE FIRST TIME YOU HAVE VOLUNTEERED IN HANFORD ELEMENTARY SCHOOLS? YES NO

IF NOT, WHERE/WHEN DID YOU VOLUNTEER?

| STUDENT'S NAME | TEACHER | GRADE | STUDENT'S NAME | TEACHER | GRADE |
|----------------|---------|-------|----------------|---------|-------|
| | | | | | |
| | | | | | |
| | | | | | |

IN CASE OF EMERGENCY, CONTACT: _____ PHONE# _____

PLEASE COMPLETE AND SIGN BELOW

Have you ever been **ARRESTED, CHARGED, or CONVICTED** with a criminal felony or misdemeanor? YES NO
 Falsification or Omission on this official public document is a criminal offense and can be prosecuted.
 If in the future I am arrested and out on bail for any sex offense, drug-related crime, or crime of violence, and/or convicted for any felony or misdemeanor (other than minor traffic violation), I understand that I must inform the District prior to any further volunteer service being performed.

Do you agree to maintain CONFIDENTIALITY of students' information? YES NO

By signing below, I agree to the rules and regulations of the District's volunteer program and that any product produced while a volunteer shall be the District's property. I will be considered a volunteer only during the time and as requested by the supervising official for each specific volunteer assignment. I understand that all involvement with students, during the volunteer assignment is restricted to the school day, on the school grounds, or at a school-sponsored activity. My signature below certifies that I have reviewed the criminal offense statement and responded truthfully. FALSIFICATION OR OMISSION ON THIS OFFICIAL PUBLIC DOCUMENT IS A CRIMINAL OFFENSE AND CAN BE PROSECUTED, AND MAY CONSTITUTE GROUNDS FOR DISMISSAL. Completion of a Criminal Background Check must be done prior to consideration for volunteer assignment.

| | |
|----------------------------|-------------|
| VOLUNTEER SIGNATURE | DATE |
| | |

NEW VOLUNTEERS ONLY – INFORMATION FOR LIVESCANS

| | | |
|-------------|-----------------|--------------------------|
| HEIGHT: | WEIGHT: | EYE COLOR: |
| HAIR COLOR: | PLACE OF BIRTH: | SOCIAL SS# - - |

TO BE COMPLETED BY DISTRICT OFFICE

| | | | |
|---------------|-------------|---------------|-----------------|
| TB CLEARANCE: | TB EXPIRES: | DOJ APPROVAL: | BOARD APPROVAL: |
|---------------|-------------|---------------|-----------------|