

Trinity Area School District Volunteer Form

Please complete and return this volunteer request form to your child's principal along with copies of the following required clearances/documentation:

- ACT 34, PA State Police Criminal Record Check
- ACT 151, PA Child Abuse History Clearance
- ACT 114, FBI Fingerprint w/UEID# (Code **1KG6ZJ**)
- ACT 24, Arrest/Conviction Report and Certification Form
- Copy of Valid Driver's License
- Student Privacy & Volunteer Confidentiality Agreement
- Training with the Building Principal - Completed every school year.

Volunteer information, forms, and links are on our website under the Parents/Volunteers tab.

www.trinitypride.org

I am requesting to be placed on the Trinity Area School District's Volunteer List.

Name:
Email:
Phone:

In which building(s) would you be volunteering? (Circle)
North South East West Middle High

Volunteer Signature:

Date of Training_____

Approved by_____