



# Dry Creek Joint Elementary School District

8849 Cook Riolo Rd.  
Roseville, Ca 95747  
916-770-8800

## Volunteer Application

Name : \_\_\_\_\_ Phone : \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email Address: \_\_\_\_\_

School Site/s: \_\_\_\_\_ Student's Name: \_\_\_\_\_

Current Classroom Teacher's Name: \_\_\_\_\_

VOLUNTEER ASSIGNMENT: \_\_\_\_\_

Are there any limitations or restrictions we should know about?: \_\_\_\_\_

(If "yes", please explain when, where and the disposition of incident.) \_\_\_\_\_

Do you plan on attending an off campus or overnight field trip during this school year?  Yes  NO

If you marked yes you **MUST** be fingerprinted prior to volunteering on a field trip.

Have you been fingerprinted in DCJESD before?  Yes  NO

I consent that the above information is correct and accurate:

\_\_\_\_\_  
VOLUNTEER SIGNATURE

\_\_\_\_\_  
Date

\_\_\_\_\_  
PRINCIPAL SIGNATURE

\_\_\_\_\_  
Date

This form must be completed and given to the Principal or Designee prior to volunteering. If volunteer is going to be attending an off campus or overnight field trip then they **MUST** be fingerprinted prior to the event. Follow required steps for Live- Scan request.

Office Use only:

TB Provided

HRA-011-a

June 12, 2017

Please keep original on site with TB proof and send only a copy of the application form to HR with form HRA-011-b.