

**A SEPARATE APPLICATION FORM IS REQUIRED FOR EACH SCHOOL YOU WISH TO VOLUNTEER AT.
SCHOOL SITE AND PERSONNEL SERVICES USE ONLY:**

School Site:	Fingerprint Clearance Date:
Principal's Signature:	TB Clearance/Expire Date:
Mandatory Training Attendance Date:	Vector Solutions Completion Date:

BARSTOW UNIFIED SCHOOL DISTRICT

551 South Avenue H, Barstow, CA 92311 / 760-255-6001 | Fax 760-255-6002

VOLUNTEER APPLICATION FORM

To ensure the safety of our students, all volunteers are required to complete this application form. You will be required to attend Volunteer Training provided by the District as well as complete the mandatory online training modules as well as have a background check/Fingerprint Clearance, and TB Clearance every four (4) years.

You will not be eligible to volunteer until you have completed and met all the requirements.

VOLUNTEER INFORMATION:

Last Name:	First Name, Middle Initial:	Date of Birth:
Phone Number:	Email Address:	
Address-Street, City, State, Zip:		
Emergency Contact Name and Phone Number:		

Please list all children who attend District:

<i>Child's Last Name, First Name</i>	<i>School Attending</i>	<i>Grade Level</i>	<i>Volunteer at:</i>
			Yes No
			Yes No
			Yes No
			Yes No

Are you a current employee of Barstow USD? **Yes** or **No**. If yes, what capacity? _____

I am interested in volunteering with the following: (Check all that apply)

Classroom Volunteer Field Trips Other. Please Specify: _____

STATEMENT OF UNDERSTANDING

Barstow Unified School District believes every student should be able to enter a learning environment free from crime, violence, drugs, and abuse. In the interest of our students, staff and community, the District reserves the right to screen all volunteer applicants for any record of criminal history. All volunteers are subject to an investigation to determine that they are not registered sex offenders, and /or have drug convictions and/or convictions of committing serious and/or violent felonies in accordance with Education Code 35021 and Administrative Regulation 1240.

Have you ever been convicted of a misdemeanor or felony, or currently have charges pending against you? **Yes / No**

Failure to disclose this information will result in a denial of volunteer status.

If yes, list all convictions including, but not limited to convictions for "driving under the influence," and provide a brief explanation.

I certify that I have made true, correct and complete answers and statements on this Volunteer Application Form in the knowledge that they may be relied upon in considering my application, and I authorize investigation of all statements contained in this form. I understand that any omission or falsely answered statements made by me on this application or any supplement to it will be sufficient grounds for failure to be approved as a volunteer.

Signature of Volunteer Applicant: _____ **Date:** _____