

CLASSROOM VOLUNTEER AND FIELD TRIP CHAPERONE OR DRIVER APPLICATION

CUSD appreciates parent volunteer service. The District, however, needs to ensure that all volunteers maintain complete confidentiality regarding all student issues and agree to abide by all school rules and district policies. This form is to be completed by all regular classroom volunteers, field trip chaperones or drivers before serving in any of these capacities. By signing this form you agree to these conditions while volunteering in CUSD.

PLEASE COMPLETE AND RETURN TO THE SCHOOL OFFICE

Legal Name: _____ Date of Birth: _____

Your Student's Name(s): _____

Volunteer at School Site(s): _____

Your Occupation: _____ Employer: _____

Day Phone: _____ Evening Phone: _____

Address: _____

Driver's Lic. #: _____ State: _____

Availability (Circle all that apply): Mon / Tues / Wed / Thurs / Fri / Sat All Day / Mornings / Afternoons

If you are driving a private vehicle, CUSD Form # 212a *Vehicle Safety Certification* and # 212b *Auto Service Record* must also be completed and on file with Carmel Unified School District.

	Yes	No
Have you ever been convicted of a felony or entered a plea of "no contest" to a felony charge?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a misdemeanor or entered a plea of "no contest to a misdemeanor charge?"	<input type="checkbox"/>	<input type="checkbox"/>
Are you required to register as a sex offender?	<input type="checkbox"/>	<input type="checkbox"/>
Are any criminal charges currently pending against you?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "yes" to any of these questions, please explain on the back of this form. A "yes" response may not necessarily disqualify you from volunteering.

I swear under penalty of perjury that the information I have provided is true. I understand that providing false information will disqualify me from volunteering. By my signature below, I certify that I have agreed to volunteer my services in the Carmel Unified School District. I acknowledge that I have agreed to perform these services without any promise or expectation of compensation. I offer my services freely to the Carmel Unified School District in order to further a civic purpose.

Signature: _____ Date: _____

Emergency Contact Numbers

Name	Relationship	Phone