INTERESTED IN JOINING AS AN OVERNIGHT FIELD TRIP CHAPERONE VOLUNTEER?

THIS CHECKLIST IS HERE TO HELP!

Volunteers supporting as **OVERNIGHT FIELD TRIP CHAPERONES**, must be fingerprinted, TB tested/assessed, and complete State Mandated Reporter & Sexual Harassment Certifications.

We recommend all parent volunteers also complete the Driver Certification Paperwork to be ready for future Field Trips.

All clearances must be received and on file before any volunteering can begin, as required by law, Ed. Code and TUHSD policy.

USE THIS CHECKLIST BELOW TO GET STARTED ON CLEARANCES

Return all items to the HR Admin Asst - Janet Turnbull

If you have any questions you can contact the HR Admin Asst

jturnbull@tamdistrict.org

415 945 1030 (*voicemail/text/fax)*

- ☐ Complete the Chaperone/Volunteer Application
  Return the application to the HR Admin Asst - Janet Turnbull jturnbull@tamdistrict.org

- ☐ Fingerprint Background Check
  Send a copy of your driver's license / government ID to the HR Admin Asst. Let them know who you are, what site you're volunteering with, and if you are a parent. You can email or text a copy of the ID. Background checks only have to be completed once.

- ☐ Tuberculosis Clearance
  TB tests and risk assessments are valid up to 4 years from the date they were conducted. If you have had a recent TB test or assessment conducted by a medical professional you can send this to HR via email or text. If you need support being tested or assessed please let HR know.

- ☐ State Mandated Reporter & Sexual Harassment Certifications
  Upon receiving your contact information, HR will add you to an online platform where you can complete these certifications. Please check spam or junk folders just in case, for an email from Keenan Vector Solutions. *If you have completed these certifications recently for another organization or school, you can send those copies to HR to see if they will satisfy this requirement.*
  **please note these certifications must be completed annually.*

- ☐ Driver Certification Form
  All field trip volunteer drivers please complete the attached school driver certification form and send a copy of your Policy Declarations page showing your name, expiration date, and liability limit of $100,00- $300,000 with your application. Please see the Board Approved Driver Instruction Form for further information attached.

INFO FORM

Volunteers supporting as OVERNIGHT FIELD TRIP CHAPERONES, must be fingerprinted, TB tested/assessed, and complete State Mandated Reporter & Sexual Harassment Certifications. All clearances must be received and on file before any work can begin, as required by law, Ed. Code and TUHSD policy.

Name: (First, Middle Initial, Last)

Email

Telephone Number (Cell or Home)

Street Address

City, State, Zip Code

Emergency Contact Name

Relationship To Emergency Contact

Email

Telephone Number

Are You Currently A TUHSD Parent?

Do You Have A Family Member Working At TUHSD?

If Yes, Please Provide:

Family Member's Name

Job Description

Site/ School Location

INFO FORM CONT'D

Volunteers supporting as OVERNIGHT FIELD TRIP CHAPERONES, must be fingerprinted, TB tested/assessed, and complete State Mandated Reporter & Sexual Harassment Certifications. All clearances must be received and on file before any work can begin, as required by law, Ed. Code and TUHSD policy.

Professional References # 1:

Job Title Name

Mailing Address

Organization/Company

Phone Email

Professional References # 2:

Job Title Name

Mailing Address

Organization/Company

Phone Email

Most Recent Employer

Okay to Contact?

Name Of Supervisor

Your Position Title

Reason for Leaving

VERIFICATION FOR CHAPERONE / VOLUNTEER

Volunteers supporting as OVERNIGHT FIELD TRIP CHAPERONES, must be fingerprinted, TB tested/assessed, and complete State Mandated Reporter & Sexual Harassment Certifications. All clearances must be received and on file before any work can begin, as required by law, Ed. Code and TUHSD policy.

LEGAL INFORMATION:

The following information is REQUIRED for your application to be considered. Your answers will not necessarily disqualify you from consideration, except for affirmative responses to certain enumerated sex and/or drug convictions and/or convictions for committing serious and/or violent felonies.

1. Have you ever been convicted of a felony or misdemeanor, or do you currently have a felony or misdemeanor charge pending? *Convictions include a plea of guilty, nolo contendere (no contest) and/or a finding of guilty by a judge or a jury, or a conviction that has been judicially dismissed or ordered sealed, including 'expungement' granted pursuant to Penal Code section 1203.4. (Note: Exclude convictions related to the use of marijuana that are over two years old)*

YES NO ☐ ☐

IF YES, EXPLAIN:

2. Have you ever been dismissed or asked to resign from any position?

YES NO ☐ ☐

IF YES, EXPLAIN:

CERTIFICATION

I CERTIFY THAT I HAVE MADE TRUE, CORRECT AND COMPLETE ANSWERS AND STATEMENTS ON THIS APPLICATION IN THE KNOWLEDGE THAT THEY MAY BE RELIED UPON IN CONSIDERING MY APPLICATION. I AUTHORIZE INVESTIGATION OF ALL STATEMENT HEREIN RECORDED. I RELEASE FROM LIABILITY ALL LIABILITY ALL PERSONS AND ORGANIZATION REPORTING INFORMATION REQUIRED BY THIS APPLICATION.

SIGNATURE:

TUHSD

E(2) 3541.1

DRIVER INSTRUCTION FORM

1. You must have a valid driver's license and current liability/medical insurance at least $100,000/$300,000 per occurrence.

2. Your vehicle must meet District safety standards:

   - Minimum tread on tires (not bald or worn)
   - Working lights, turn signals, mirrors and horn
   - Spare tire, tire jack, highway flares
   - Normally operating engine
   - Normal interior and exterior
   - Normal mechanical system, including steering and brakes

3. You may carry only the number of passengers for which your vehicle was designed. If you have a truck or pickup, carry only as many as can safely sit in the passenger compartment.

4. **You may transport <u>only</u> students or adults authorized to participate in this school activity. Other passengers, including hitchhikers, are not permitted.**

5. You must require each passenger to use a safety belt.

6. a. During the first 12 months after a student is licensed, the student must be accompanied by a driver 25 years of age or older if the student drives between the hours of 12:00am (midnight) and 5:00am or if the student transports people under the age of 20 **at any time.**

   b. During the second 12 months after the student is licensed, the student must be accompanied by a driver 25 years of age or older if the student drives between 12:00 am (midnight) and 5:00am. However, the student may transport passengers under age 20 without supervision between the hours of 5:00 am and midnight.

All student drivers that volunteer to driver other students under age 20 for any District sponsored event (i.e. field trips, athletic events) must have signed Parent Permission on the School Driver Certification form (See E(1) 3541.1) the date the license was issued and whether the student must be accompanied by a driver 25 years of age or older (this can either be a parent, teacher or other volunteer.)

TUHSD

SCHOOL DRIVER CERTIFICATION FORM
FOR FIELD TRIPS OTHER THAN ATHLETIC EVENTS

Driver is an:

- ☐ Employee
- ☐ Parent/ Guardian
- ☐ Adult Volunteer
- ☐ Student (*Student drivers must obtain parent permission. Please fill box below* ***only for a student driver***.)

☐ I hereby give my permission for my child named below to serve as a volunteer driver.

Parent Signature: _____ Date: _____

Student name (Print): _____ Date of Birth: _____

Address: _____ Phone number: _____

Student Driver's License No. Expiration Date: _____

Date License Issued: _____

The student Driver needs to be accompanied by a driver 25 years or older if transporting other students under 20 years old. ☐ Yes ☐ No

Vehicle Information

Name of Owner: _____

Address: _____ Phone: _____

Vehicle Year: _____ Make/ Model: _____ License Plate: _____

Registration Expires: _____ Seat Capacity: _____ No. of Seat Belts: _____

Insurance Information

☐ **Please attach a copy of the Policy Declaration page/Coverage.**

(The minimum acceptable liability limit for privately owned vehicles is $100,000 per occurrence and $300,000 medical coverage. If you transport students often, it is recommended that your liability coverage be $300,000 per occurrence).

Policy Number: _____ Expiration Date: _____

Name Insurance Carrier: _____ Liability Limits of Policy: _____

Insurance Agent Name: _____ Phone Number: _____

Driver Certification Statement

I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years.

I certify that the information given above is true and correct. I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages.

Name _____ Signature _____ Date _____