

Waterville Central School District

SUPERINTENDENT'S REGULATION

PERSONNEL

6201.1

VOLUNTEER APPLICATION FORM

VOLUNTEER WHO ASSIST SCHOOL PROGRAMS ON A REGULAR BASIS

Thank you for your interest in being a volunteer at Waterville Central School District. Please provide the following information:

Name: _____

Address: _____

Home Telephone Number: _____ Work Telephone Number: _____

Days and Times Available to Volunteer: _____

Area of Volunteer Interest: _____

Volunteers at Waterville Central School District are expected to:

- Sign in and out at the Main Office;
- Wear their Volunteer Tag while in the school building;
- Maintain confidentiality regarding student records and communications;
- Address any concerns about individual students with the appropriate supervisor;
- Abide by the District's Code of Conduct and the Rules and Regulations of the School and Classroom in which they are volunteering;

I hereby affirm that I have no criminal convictions and that I am of good moral character. I authorize the District to contact if necessary the following two non-family personal references regarding my background and good moral character:

Name: _____

Name: _____

Address: _____

Address: _____

Telephone Number: _____

Telephone Number: _____

I attest that the information provided in this volunteer application is true and correct and agree to abide by the expectations outlined:

Signature

Date

Print Name

cc: Principal's Office

Approved by the Superintendent: 01/26/16

Adopted: 12/26/03