PARENT EDUCATION PRESCHOOL
2026-2027 PROGRAM ENROLLMENT PACKET

1. Complete the online Adult Education Registration Form for the Parent Education Preschool Program (different process than enrolling into the 5 day program).
    - Create new account (or if you are a returning parent use the same account information to log-in to register)
    - Click on View All Classes and choose Parent Education Preschool
    - Complete the registration by clicking REGISTER NOW and checking out

2. Complete the SCUSD Volunteer Application that is included in this packet.
    - Email the entire completed application to adulteducation@scusd.edu or return to Charles A. Jones Career and Education Center between the hours of 8:00am – 4:00pm Monday – Thursday

3. Provide a TB skin test (or chest x-ray) clearance. If you have had a TB skin test done in the past four (4) years, it is valid if you submit proof.
    - Email TB Results to adulteducation@scusd.edu or return to Charles A. Jones Career and Education Center between the hours of 8:00am – 4:00pm Monday – Thursday

4. Provide proof of completing the Volunteer Mandated Reporter Training.
    - Email Certificate of Completion to adulteducation@scusd.edu or return to Charles A. Jones Career and Education Center between the hours of 8:00am – 4:00pm Monday – Thursday

5. Provide Volunteer Driver Form for field trips and events. Required even if you are only driving your own child.
    - Email Certificate to adulteducation@scusd.edu or return to Charles A. Jones Career and Education Center between the hours of 8:00am – 4:00pm Monday – Thursday

6. Take the following forms to Human Resources at the Serna Center 5735 47th Avenue, Sacramento CA 95824 to complete the background check:
    - Human Resources Fingerprinting Requirements Form in the packet
    - Live Scan Fingerprinting Form in the packet (already has the codes)
    - Authorized Approval Form in the packet (already signed by Director)

The cost for volunteer fingerprinting at SCUSD is $47.00. This can be paid by cash (exact change only), debit or credit card. Fingerprints are "good" for the duration of "uninterrupted" volunteering in the district. If you have fingerprints on file with SCUSD and you are a current active volunteer, you do not need to complete this process again.

Fingerprinting is by appointment only. Call the Fingerprinting Office at 916-643-9050 to schedule an appointment or to schedule appointment online, please visit https://www.scusd.edu/fingerprinting-service. For more information, email doj@scusd.edu.

*Once the criminal background check is complete and the volunteer has been cleared to be in a classroom with children, SCUSD Adult Education will contact the volunteer with the steps to enroll in the Parent Education Program course.

Reminder: To ensure safety and minimize distractions to the learning environment, please do not bring infants or non-school age children to school with you when you are volunteering in the classroom. Volunteers are asked to arrange for off-campus childcare.

PARENT EDUCATION PRESCHOOL PROGRAM

INTEREST AND AGREEMENT FORM

This form is for interested participants and constitutes an agreement to participate in the Parent Education Preschool Program **(PEP)** for the 2026-2027 school year.

By completing the form below and providing your signature, you understand that this form constitutes an agreement to participate in the **PEP,** including, but not limited to, paying associated parent monthly tuition (on time by the 3rd of each month) outlined in the tuition cost schedule below, completing and being cleared by the Sacramento City Unified School District's volunteer guidelines and requirements, and adhering to the **PEP** policies outlined in the Parent Education Preschool Program Contract that you will receive during orientation.

The program follows the SCUSD Adult Education calendar included in this packet. Participants are responsible for the entire cost of their program enrollment. Parents will pay program tuition costs monthly. Program yearly costs for families who move between the 1-day, 4-day, and 5-day programs will be adjusted accordingly. All tuition costs in the contract are binding. There will be no refund for early monthly withdrawal.

Parents who leave the program with delinquent fees will be notified about their outstanding

balance by email. A deadline to respond will be given and parents will be advised that failure to respond will result in the account being turned over to a collection agency.
Monthly tuition costs are due by the 3rd of each month. If tuition costs are not paid by 10th of each month, you may be dis-enrolled from the Parent Education Preschool Program or sent to collections, or both. **Unpaid program balances will be charged against the student's account and can be sent to collections for non-payment.**

Monthly tuition costs are based on the contract. There are no adjustments for illness, family vacations or other absences. This includes school-related activities such as after-school clubs, tutoring, field trips, overnight field trips etc.

You must notify SCUSD Adult Education at adulteducation@scusd.edu to stop being charged monthly tuition costs if you decide to enroll. Monthly tuition costs will not be prorated for partial months.

Note: The program operational costs are **incurred yearly**. When adults commit to a year and then withdraw or drop for any reason, the operational costs are still incurred. **There are no refunds.** By signing below, I accept the terms and conditions of the SCUSD Adult Education Parent Education Program, including required weekly and monthly participation and the auto-billed monthly tuition costs.

Adult First and Last Name	
Adult Signature	
Date of Adult Signature	
Child's First and Last Name	
Child's Date of Birth	
Adult Address	
Adult Telephone Number	
Adult Email Address	
Other Family Members Cleared to Volunteer in the Classroom (please list all of them and submit a the SCUSD Volunteer Packet for each adult volunteering)	

Program Choice:	Edward Kelley 5 day (Monday – Friday 8:45am – 11:45am)

SCUSD ADULT EDUCATION
PARENT EDUCATION PRESCHOOL PROGRAM
TUITION COST SCHEDULE

SCUSD Adult Education tuition costs for the **2026-2027** school year are as follows (partial months are **not** prorated):

- **$100.00 non-refundable registration fee per child****

SCUSD Adult Education Tuition Costs:

- **5 day program (potty-trained 3 and 4 year olds)**
  - **Monday – Friday**
  - **8:45am – 11:45am**
  - **$450 auto-billed monthly ($4500 yearly)**

Monthly tuition costs are auto-billed each month from August 2026 through May 2027.

If you have any further questions, please feel free to contact:
Marla Clayton Johnson, Director of Adult Education
MARLA-CLAYTON@SCUSD.EDU
or ADULTEDUCATION@SCUSD.EDU
916-395-5800
Caj.scusd.edu

SCUSD Adult Education

2026-2027

Academic Year Calendar

July 2026

Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

August 2026

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

September 2026

Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

October 2026

Su	M	Tu	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

November 2026

Su	M	Tu	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

December 2026

Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

January 2027

Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

February 2027

Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						

March 2027

Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

April 2027

Su	M	Tu	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

May 2027

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

June 2027

Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

Job Center/School Closed/No Testing/No Students

No Academic Student Classes

5451 Lemon Hill Avenue
Sacramento, CA 95824

Parent Education Preschool Credit Card Authorization Form

Parent/Guardian Information

Parent's Name: _____

Child's Name: _____ Program Attending: 5 Day Edward Kelley

Billing Address: _____

City, State, ZIP: _____

Phone Number: _____

Email Address: _____

Payment Authorization

I, the undersigned, authorize the Charles A. Jones Career & Education Center to auto-charge my credit card listed below monthly, by the 3rd of each month, for each child's tuition cost on my behalf.

Cardholder Name: _____

Credit Card Type: □ Visa □ MasterCard □ Discover

Credit Card Number: _____

Expiration Date: _____ CVV: _____

Billing Zip Code: _____

Amount Authorized: $_____

Purpose of Charge: SCUSD Adult Education Parent Education Preschool Program Tuition

Acknowledgment and Signature

By signing below, I acknowledge and agree, to the following:

- I am the authorized cardholder for the credit card listed above.

- I authorize the Charles A. Jones Career & Education Center to use this card for auto-billed payments.

- I understand that this authorization is valid for the specific transactions indicated above.

Cardholder Signature: _____

Date: _____

Please contact adulteducation@scusd.edu if you have questions about the auto-billing process. Declined cards will be charged a $25 fee in addition to the monthly tuition cost.

Sacramento City Unified School District

VOLUNTEER PERSONAL AUTOMOBILE USE FORM

[One Form Required for Each Driver - Approval Required]

Thank you for volunteering your time and your automobile to help transport our students to off-site events or activities. In order to protect the health and safety of our students, our District requires that anyone (employee or volunteer) using their personal automobile to transport students to and from sanctioned activities must receive prior approval. Before we can issue such approval, certain information must be obtained at least 6 weeks before you transport our students. Youmust also agree to abide by certain rules regarding the operation of the vehicle as set forth below.

REQUIRED INFORMATION

Name of Driver:	
Calif. Driver's License No. & Exp. Date:	
Vehicle(s) Year/Make/Model:	
Vehicle(s) License Plate No.:	
Insurance Carrier:	
Insurance Policy # and Expiration Date:	
Liability Coverage Limits:	(Minimum Required: $100,000/300,000 liability and $50,000 property damage)

We also require a photocopy of (a) your driver's license, and (b) your Insurance Policy Declarations Page. Should your driver's license or insurance policy expire during the school year, updated photocopies showing their renewal are required before you will again be eligible to transport students. By signing below, you are also authorizing the District to (a) obtain a copy of your driver record history and status of your driver's license, (b) conduct a criminal background check, and (c) contact your insurance company to confirm your insurance status. Also, **please be advised** that pursuant to Insurance Code Section 11580.9(d), in the case of an accident, **your insurance will provide the primary coverage for any accident resulting in bodily injury or property damage**. The District's automobile liability coverage will apply, if at all, only after your insurance coverage is exhausted through the payment of covered claims. The District does not cover, nor is the District responsible for, comprehensive, uninsured motorists, or collision coverage for your vehicle.

VEHICLE SAFETY AND TRANSPORTATION PROCEDURES AND REQUIREMENTS

For the safety of our Students, by signing below, you are also agreeing to the following rules and requirements:

1. I will not operate an automobile while impaired, whether due to alcohol, drugs (prescription or nonprescription), lack of sleep, or distraction of any kind. I will at all times comply with California law regarding proper operation of the vehicle, including compliance with all speed limits and posted signs and placards.
2. I will not transport students in a vehicle I have reason to believe may be mechanically unsafe or that may become unsafe due to weather or other natural conditions. I will not transport students unless I have a working seatbelt for each student. Seatbelts are to be used at all times by myself and all transported students. The vehicle(s) may be inspected by a District representatives.
3. I am over the age of 21 and will be the sole driver of the vehicle for any given activity, event or competition. I will not let anyone other than myself and authorized students ride in the vehicle. However, I may seek written permission from the District to allow another child of mine to ride in the vehicle to a specific activity, event, or competition **if** the destination involves an activity, event or competition generally available to the public or, at my expense and with District permission, I can purchase admittance for such other child.

Printed Name	**Signature**	**Date**

Date Received by District:	**Received by:**

THIS FORM IS TO BE HELD ON FILE IN THE MAIN OFFICE FOR A PERIOD OF TWO (2) YEARS FROM THE DATE OF THE CURRENT SCHOOL YEAR

Sacramento City
UNIFIED SCHOOL DISTRICT

Dear Volunteer,

We are pleased that you have decided to participate in the Sacramento City Unified School District (SCUSD) Volunteer Program! As parents, grandparents, neighbors and community members you have valuable ideas, talents and time to share with our students and our schools. As a volunteer, your deeper engagement directly supports the district's guiding principle:

"Ensuring every student has an equal opportunity to graduate with the greatest number of postsecondary choices from the widest array of options."

It is our belief that our volunteer programs are beneficial to everyone involved. Volunteers help foster stronger school/community relationships by creating common ownership in the success of our schools, as well as demonstrating the importance of community service to our students. All SCUSD Volunteer Program requirements are designed with student and adult safety in mind.

The SCUSD Volunteer Program provides support and guidance to schools to help them facilitate their parent and community engagement programs. Volunteers can work in a variety of capacities: doing work from home; acting as tutors/mentors; providing assistance in the classroom; participating on business/community partnership advisory boards; assisting in a school's main office or library/media centers and organizing fundraising efforts for school foundations, scholarships, field trips and extracurricular activities.

This packet includes:

- Volunteer Protocols and Approvals
- Definition of the role of a parent/guardian visitor
- Definition of the role of a volunteer
- Volunteer Registration Process
- Volunteer Registration Form
- Code of Conduct
- Volunteer Fingerprinting and Authorized Approval
- Volunteer Interest Form

If you have any questions, please direct them to the SCUSD Family and Community Empowerment (FACE) Department at (916) 643-7924.

Definition of a Parent/Guardian Visitor

Parent/Guardian Visitors*

Sacramento City Unified School District wants to encourage parents/guardians to be active participants in their child's education. While some parents/ guardians may not be able to volunteer on a regular basis, there are still opportunities to be involved at the school site.

***Parent Visitors do not have the same definition as a volunteer.**

A Parent/Guardian Visitor is a parent /guardian who visits the school on an intermittent basis, **no more than 10 days out of the 180-day school year**, to participate in activities in view of school staff, and are never alone with students.

Parent/Guardian Visitors may:

- Attend a classroom/school event, school fair, recognition ceremony or school celebration.
- Visit the classroom or lunchroom on a limited basis. Act as a presenter for a classroom/school event such as Career Day.
- Participate in school beautification projects such as a School Garden Day.

Parent/Guardian Visitors on field trips:

- Limited to day field trips only, **no overnights.**
- Parent/Guardian visitors are allowed to take only their own child on a field trip **with prior approval from the administrator.**
- Parent/Guardian visitors must also make arrangements with their child's teacher to be on the field trip list prior to the event.
- Parent/Guardian visitor must wear a **visitor identification badge** at all times.
- Parent/Guardian visitor must remain with their own child throughout the field trip.
- Parent/Guardian visitor **must never be alone with other children**.
- Teachers must **not allow visitors to supervise children other than their own**.

Visitor Identification

All visitors must sign-in at the front office and wear an identification badge at all times.

For more information on school/classroom visitation, please refer to the SCUSD Annual Parent and Student Rights Notification and Standards of Behavior.

SCUSD Visitor Code of Conduct

As a Visitor, we require that you follow our SCUSD Visitor Code of Conduct:

Please make an appointment with your school site if you plan to visit the classroom.

Understand that your role is a supportive one. The teacher and principal are completely in charge. If the teacher leaves the room, the teacher in the next room assumes responsibility.

You must not be left in charge of a classroom. You may not be alone with students.

Remember, visitors in a classroom for observation of their student may not interrupt teaching. If you have questions for the teacher, please ask them outside of class time.

Maintain student confidentiality at all times. Do not discuss any student other than your own.

Use good judgment and avoid any compromising situations. Never be left alone with students out of view of other people. Always use adult bathrooms.

Please do not take pictures or videos of students, other than your own, without permission.

Please maintain a constructive attitude. Do not make negative comments about the school, its personnel or the students in front of students.

Sign in each time you visit.

Please dress and act as a role model.

Remember, SCUSD has a zero-tolerance policy. Never be under the influence of drugs or alcohol when with students on or off school grounds. Do not smoke on school grounds or at any time around students.

Do not use cellphones in the classroom or at any time around students.

Definition of a SCUSD Volunteer

Volunteer Definition

A volunteer is a parent/guardian, community member or other adult who assists at a school site or program on a regular or semi-regular basis in **a non-essential role**. Also, parents/guardians who observe or visit their child at school on a scheduled basis and stay more than 15 minutes each time are considered volunteers.

Authorized parents/guardians are not prohibited from visiting their child's classroom or school campus, if that visit is in compliance with Board Policy, school rules and applicable law. A parent/guardian picking up their child from school or occasionally observing or visiting their child's school is not considered a volunteer.

Volunteer non-essential activities include, but are not limited to:

1. Coaching (non-paid)
2. Short-term supervision of students
3. One on one tutoring or mentoring outside the classroom or other supervised setting
4. Attending or chaperoning school sponsored trips
5. Transporting students in private vehicle
6. Student observation as part of a formal teacher preparation program
7. Any other volunteer activity, including that done by parents in childcare and developmental programs, where there is a possibility of unsupervised contact with children
8. Any volunteer activity where the funding agency requires criminal record clearance

Volunteers who chaperone field trips:

Refer to the site administrator for direction and clearance.

Volunteer Drivers (Optional):

If you wish to volunteer to drive students other than your own to a field trip or event, please fill out the Driver's Forms available online https://www.scusd.edu/connect/volunteer under optional forms.

Exclusion of Volunteers:

- Any person who is required to register as a sex offender shall not serve as a volunteer.
- Any person who has been convicted of a serious or violent felony shall not serve as a volunteer.
- Any person arrested for a serious or violent crime shall not serve as a volunteer.
- For any other conviction, the Superintendent or designee has the discretion to deny volunteer service depending on the nature of the conviction.

Volunteer Identification:

- Volunteers are required to sign in at the front office and wear Identification badges.

Tuberculosis Testing:

- Volunteers must provide documentation, dated within the past 60 days, showing they are free of infectious tuberculosis (TB). They may provide **one** of the following:
    - a Certificate of TB Risk Assessment and/or TB Examination
    - a negative TB Test
    - a statement from a medical provider that states that the volunteer is free of infectious tuberculosis.
- Per Education Code, a volunteer who has volunteered or has been employed in another school district will be approved to volunteer if they can provide written verification from the former district that they were examined within the past four years and found to be free of infectious tuberculosis.
- Volunteers must provide documentation showing them to be free of infectious tuberculosis every four years.

Workers' Compensation

Unsalaried volunteers may be considered employees of the district for worker's compensation insurance purposes. If injured while serving as a volunteer in the district they must call the workers' compensation reporting line at: (916) 643-9299 or (916) 643-9421.

For additional information about SCUSD Volunteer Policy, please refer to the summary of Administrative Regulation (AR 1240) and School Board Policy (BP 1240) that are relevant to SCUSD volunteers.

SCUSD Volunteer Registration Form

Thank you for your time and interest in becoming a Sacramento City School District Volunteer!

You are not authorized to volunteer on any campus until the mandatory requirements have been fulfilled and you have been notified. If you will be a volunteer driver for any student activities, you must also complete the "Personal Automobile Use" form and fulfill the requirements of that process.

Personal Information

Last Name | First Name | Middle Initial | Date of Birth

Address | City | Zip

Home Phone | Cell Phone | Work/Other

Email Address

School Sites Where I Will Be Volunteering | Name of student(s) & Grade

In Case of Emergency Notify | Relationship | Phone Number

Place of Employment

I am currently a Sacramento City Unified School District employee with fingerprints and TB clear on file.

☐**YES** ☐**NO**

For office use:

☐TB Clearance – Valid Through: (Issuance date plus 4 years)

☐ If necessary, X-Ray Clearance on file.

☐ Fingerprint clearance- Date _____

☐ Mandated Reporter Training- Date Completed _____

I hereby certify that the information contained in this Registration Form is true and correct to the best of my knowledge and agree to have any of these statements checked by the District, unless I have indicated to the contrary. Furthermore, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the District as well as from the use or disclosure of such information by the District, or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this Registration Form may result in my failure to volunteer.

Signature of Volunteer | Date

MARLA CLAYTON JOHNSON 6/1/26

***Signature of Site Administrator REQUIRED** (print & sign) DIRECTOR OF ADULT EDUCATION | Date

SCUSD Volunteer Code of Conduct

As a Volunteer, Your Role and Responsibilities in the School Are Unique

Understand that your role is a supportive one. The teacher and principal are completely in charge. If the teacher leaves the room, the teacher in the next room assumes responsibility. You must not be left in charge of a classroom.

Remember volunteers are only permitted to work with students on school grounds and under the supervision of certificated staff. Have no outside contact with an individual student unless authorized by administration or parents.

Maintain student confidentiality at all times. Do not discuss any student with anyone except teachers, counselors, and volunteer coordinators.
Don't make promises you can't keep

Use good judgment and avoid any compromising situations. Work in a room with other people at all times. Never be left alone with one student out of view of other people. Always keep the door open. Always use adult bathrooms.

Strictly follow volunteer guidelines and discipline practices. Physical discipline is absolutely prohibited. Ask the teacher and volunteer coordinating staff for assistance with problematic student behavior.

Report immediately to a staff person any physical abuse or sexual exploitive behavior towards a student.

Don't engage students on any social media site, email, texts or take or show your picture or student's pictures/videos on your phone or other media devices

Volunteers Take Pride in Being Professional

Maintain a constructive attitude. Don't make negative comments about the school, its personnel or the students to other volunteers or individuals outside the school.
Be Prompt and consistent in your attendance. Teachers depend on volunteers and plan their work accordingly. Students depend on volunteers even more, especially on field trips. Notify your school as soon as possible if you are late or absent.

Keep an accurate record of your attendance by signing in each day you volunteer.
Dress and act professionally.
Establish and maintain good and frequent communication with your classroom teacher or volunteer coordinator.
Never be under the influence of drugs or alcohol when with students on or off school grounds.
Do not smoke on school grounds or at any time around students.
Do not lend money, contribute or solicit money for organizations while on school grounds.
Do not use the internet inappropriately by going to websites that are not conducive to a professional or educational environment.
Do not use cellphone in the classroom or at any time around students.

Human Resource Services

Fingerprinting Requirements

Section 44830.1 of the Education Code of the State of California requires that: *"In addition to any other prohibition or provision, no person who has been convicted of a violent or serious felony shall be employed by a school district in a position requiring certification qualifications or supervising positions requiring certification qualifications. A school district shall not retain in employment a current certificated employee who has been convicted of a violent or serious felony, and who is a temporary employee, a substitute employee, or a probationary employee. . . "*

State law* and the Sacramento City Unified Board of Education** require all classified and certificated employees to be fingerprinted within ten working days of their date of employment and before actually beginning their employment. The cost of fingerprinting is to be paid by the employee or volunteer. (*Education Code Section 45125; **Board of Education Policies AR 4212.5[a])

Please note: We do accept ATM or credit cards as payment for fingerprinting services. We also accept cash (exact amount please, we do not have change)

I, the undersigned, have read the above information, have received instructions for fingerprinting, and agree to fulfill these obligations and requirements for completion of my employment or volunteer application. Failure to comply will preclude any employment or result in termination and/or removal from being an active volunteer for Sacramento City Unified School District.

Please check appropriate box: ☐ Certificated Employee ☐ Classified Employee ☐ Volunteer ☐ Contractors

PRINT NAME _____ SIGNATURE _____

SOCIAL SECURITY NUMBER _____ DATE _____

- 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) A conviction may not necessarily disqualify you from the volunteer job for which you have applied. Convictions include diversionary offenses, or other offenses that have been plea-bargained, or for which you have pleaded no contest. **Failure to reveal convictions is grounds for immediate termination and/ or removal from the site.** Yes____ No____
- If the answer is YES, please explain (on the other side of paper):

INSTRUCTIONS FOR FINGERPRINT PROCESSING

Fingerprinting is done at the Serna Center, Human Resources Services, 5735 47th Avenue, Sacramento, CA 95824. Hours are 8:00 a.m. - 5:00 p.m., Monday-Friday. **By appointment only**



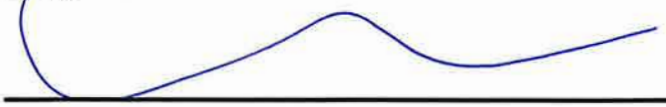
PHOTO ID IS REQUIRED

Please return this document to Human Resource Services at the date of your appointment. **Employment and Volunteer consideration is contingent upon fingerprint clearance.** If you have any questions, please call Human Resource Services at (916) 643-9050.

AUTHORIZED APPROVAL

SCUSD ADULT EDUCATION PARENT EDUCATION PRESCHOOL

SITE/PROGRAM:



SITE ADMINISTRATOR SIGNATURE

6/1/2026

DATE

***Site Administrator's signature is mandatory to apply as a SCUSD Volunteer PRIOR to bringing packet to Serna Center.**

NOTE: Site Administrator or Department Designee's Signature is mandatory to apply as a SCUSD Volunteer

Education Code §3502 prohibits the District from allowing a person required to register as a sex offender under Penal Code §290 to serve in a volunteer capacity as an aide or supervisor of students. Accordingly, the District will, before authorizing a person to serve as a volunteer conduct an automated records check pursuant to Education Code §35021.1 and/or call the Department of Justice or the Sheriff's Office to inquire whether the individual is a registered sex offender pursuant to the process set forth in Penal Code § 290.4

BUDGET CODE: PAID BY VOLUNTEER

IMPORTANT: This form is for **ALL VOLUNTEERS** or those working in programs where such screening is required. The prospective volunteer is instructed to bring this form, along with a valid California Driver's License or California Identification Card, plus their Social Security number to the Customer Service Specialist in the Serna Center in order to initiate the fingerprint and background check process. There is a fee of $47 for this process. If the site is paying the cost, please add budget code above. If the volunteer is paying for the cost, we accept cash (only exact change), debit or credit card.

Prior to beginning any assignment, SCUSD Board policy requires that all volunteers be cleared to work by the Department of Justice.

I understand this requirement and **will not volunteer** with the District until clearance is received from the SCUSD Human Resources Office.

I have received a copy of the SCUSD rules and regulations for volunteers [BP1240 and AR 1240].

I hereby fully release and discharge the Sacramento City Unified School District, its officers, employees, agents and volunteers from any and all liability arising out of or in connection with this background check and all liabilities associated with and all claims related to this background check. For the purpose of this release, "liability" means all claims, demands, losses, causes of action, suits or judgements of any and every kind that arise as a result of the above named activity and resulting from any cause other than gross negligence.

Signature _____ **Date** _____

STATE OF CALIFORNIA
BCIA 8016A
(orig. 04/2001; rev. 01/2011)

DEPARTMENT OF JUSTICE

REQUEST FOR LIVE SCAN SERVICE
(Public Schools or Joint Powers Agencies)

Applicant Submission

ORI: A0283 (Code assigned by DOJ) Type of Applicant: ☐ Classified School Employee ☐ Credentialed School Employee

The following selections are for Public Schools only:

☐ License, Certification, Permit ☐ Peace Officer ☐ Law Enforcement Officer ☑ Volunteer

Type of License/Certification/Permit OR Working Title: _____
(Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Sacramento City Unified School District
Agency Authorized to Receive Criminal Record Information

03353
Mail Code (five-digit code assigned by DOJ)

5735 47th Ave.
Street Address or P.O. Box

Cancy McArn, Chief Human Resources Officer
Contact Name (mandatory for all school submissions)

Sacramento
City

CA
State

95824
ZIP Code

(916) 643-7452
Contact Telephone Number

Applicant Information:

Last Name

First Name Middle Initial Suffix

Other Name (AKA or Alias) Last

First Suffix

Date of Birth

Sex ☐ Male ☐ Female

Driver's License Number

Height Weight Eye Color Hair Color

Billing Number
(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Phone Number
(Other Identification Number)

Home Address
Street Address or P.O. Box

City State ZIP Code

Your Number:
(OCA Number (Agency Identifying Number)

Level of Service: ☑ DOJ ☑ FBI

If re-submission, list original ATI number:
(Must provide proof of rejection)

Original ATI Number

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed

ORIGINAL - Live Scan Operator SECOND COPY - Applicant THIRD COPY (if needed) - Requesting Agency

Health and Safety Are Always Important

Adhere to District, school, and classroom policies rules and regulations.

Refer any student in need of first aid or any type of medication to the teacher or front office.

Learn and follow fire drill emergency procedures and all school rules.

Notify the principal of any accident you had on school grounds. A written form must be submitted to the principal within 24 hours.

I agree to adhere to the above code of conduct at all times when I am a volunteer at a SCUSD school site or program. I understand that my volunteer status can be revoked at any time.

_____ _____ _____

Signature Site Date

VOLUNTEER INTEREST FORM

Parent Name: _____Site/Program: Edward Kelley

Home Phone: Cell Phone:

_____ _____

Name of Child: Date of Birth of Child:

I am interested in volunteering in the following areas (check all that apply):

[] Classroom Helper

[] Reading to Children

[] Share hobby or career information

[] At-home work for classroom

[] Field Trip chaperone

[] Yard/Cafeteria Assistance

[] Volunteer Coordination

[] Library Assistance

[] Photograph events

[] Childcare during on-site event

[] Athletics

[] Mentor Students

[] Tutor Students

[] Community Gardens

[] Assist with fundraising

[] One-time family events

[] Other _____

Availability:

	Monday	**Tuesday**	**Wednesday**	**Thursday**	**Friday**
Morning 8:45am –					
11:45am					

PHOTO RELEASE

I, _____, authorize the use of my photograph for school/district publicity purposes. I hereby fully release and discharge the Sacramento City Unified School District, its officers, employees, agents, and volunteers from any and all liability arising out of or connection with the use of my photograph and all liabilities associated with any and all claims related to such use of my photograph. For the purposes of this release, 'liability' means all claims, demands, losses, causes of actions, suits or judgments of any and every kind that arise as a result of the above described activity and resulting from any cause other than the District's gross negligence.

Signature: _____ Date: _____