



EXETER UNIFIED SCHOOL DISTRICT

Volunteer Registration and Screening Form

School Year: ____/____

ALL SCHOOL VOLUNTEERS MUST COMPLETE THIS REGISTRATION FORM ANNUALLY TO VOLUNTEER. Please PRINT legibly and complete the ENTIRE form.

Prior to volunteering, ALL school volunteers MUST be cleared by the District Office.

Name of School(s) where Volunteering: _____

Volunteer Name: _____
Last First MI

Home Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____ Email: _____

Driver's License #: _____ Exp. Date: _____ Date of Birth: _____

Emergency Contact for YOURSELF: _____ / _____ / _____
First & Last Name Phone Number Relationship to STUDENT

Do you have a child/children attending our schools? Yes _____ No _____ (Check One)

Child's Full Name	/	Teacher	/	Grade
Child's Full Name	/	Teacher	/	Grade
Child's Full Name	/	Teacher	/	Grade
Child's Full Name	/	Teacher	/	Grade
Child's Full Name	/	Teacher	/	Grade

If you do not have children attending, why are you seeking volunteer approval?

Education Code 35021 requires school districts to conduct a criminal background check through the Department of Justice or a local law enforcement agency of anyone who serves as a volunteer and may have contact with students. The requirement generally applies to volunteers that assist district personnel in the performance of teaching and/or administrative responsibilities. Volunteers who are in contact with students and are under the constant supervision of a district employee are screened to determine only that they are not registered sex offenders pursuant to Penal Code 290. Volunteers that may, at times be alone with a student, are required to be fingerprinted and are screened for all criminal offenses.

In addition, ALL volunteers are required to have a current driver's license and current tuberculosis skin test, or x-ray on file.

BE SURE TO COMPLETE BACK SIDE OF THIS APPLICATION

(this portion for district office only)

T/B exp:	D/L exp:	DOJ completed:	Transportation:	MMR:	Tdap/Dtap:	Flu:
_____	_____	_____	_____	_____	_____	_____
Volunteer:			Transportation:	State Preschool:		

PLEASE COMPLETE AND SIGN BELOW:

Have you ever been convicted of a felony or misdemeanor, other than a conviction related to marijuana if it is more than two years after the date of conviction, or do you currently have a felony or misdemeanor charge pending? Falsification or Omission of information will terminate your right to volunteer.

(Convictions include a plea of guilty, no contend ere (*no contest*) and/or a finding of guilty by a judge or a jury.)

YES: _____ NO: _____ (*If yes, please attach separate piece of paper explaining conviction.*)

- I understand these requirements and will not volunteer with the district until clearance is received by the school district.
- I understand that volunteers are not compensated and that I may only provide assistance under the direction and supervision of an employee of the school district.
- I understand that my volunteer services are at the discretion of the site principal/administration, and that my services may be terminated at any time.
- I give permission for my background check to be conducted by the means deemed appropriate by Exeter Unified School District.
- I hereby fully release and discharge Exeter 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, demands, losses, causes of action, suits or judgments of any and every kind that arise as a result of the above named activity and resulting from any cause other than gross negligence.

VOLUNTEER CODE OF CONDUCT

Volunteers shall:

- Complete the Volunteer Registration Form. The completed form must be on file at the District Office by the commencement service. This form includes a requirement to disclose any prior criminal convictions. Failure to provide accurate information will result in immediate dismissal.
- Provide a current photo ID for photocopy.
- Be conscientious and concerned for the health and safety of students.
- Maintain confidentiality regarding each student and family.
- Be free of the influence of alcohol or illegal drugs when with students on or off school grounds.
- Have no outside contact with an individual student unless authorized by administration or parents.
- Adhere to district, school and classroom policies, rules, regulations and curriculum.
- Promptly inform the teacher and District Office when unable to attend or when discontinuing to serve as a volunteer.
- Dress and act professionally.
- Receive a copy of the district policy BP/AR 1240 (*attached*).

Do you agree to maintain CONFIDENTIALITY of student information? YES: _____ NO: _____

By signing below, I agree to the rules and regulations of the Exeter Unified School District's volunteer program and that any project produced while I volunteer shall be the District's property. I will be considered a volunteer only during the time and as requested by the supervising official for each specific volunteer assignment. I understand that all involvement with the students, during the volunteer assignment is restricted to the school day, on school grounds, or at a school sponsored activity. My signature below certifies that I have reviewed the criminal offense statement and responded truthfully.

Volunteer Signature _____ Date _____

If you have any questions please contact the Exeter Unified School District Office at 559-592-9421