MACONAQUAH SCHOOL CORPORATION
2018-2019 School Year
Volunteer Application

APPLICATION MUST BE ACCOMPANIED BY VOLUNTEER'S STATE-ISSUED ID (DRIVERS LICENSE).
IF NOT APPLYING IN PERSON, INCLUDE A COPY OF STATE-ISSUED ID WITH THIS FORM.

Child(ren)'s First and Last Name(s): _____

PLEASE LIST ALL CHILDREN ON ONE FORM.
It is not necessary to complete separate forms for each child or building.

Please Print Clearly

Full Given Name: _____
First Name M.I. Last Name

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____

State briefly why you'd like to become a school volunteer: _____

I give my consent to allow Maconaquah School Corporation to run a Limited Criminal History Report and Sex Offender Registry check, and provide the following information to complete these reports:

_____ Sex: ____ Male ____ Female
(Date of Birth)

Race: ____ American Indian/Alaskan ____ Asian/Pacific Islander ____ Black

____ Multi-Racial ____ White

STATEMENT OF COMMITMENT
As a volunteer working with Maconaquah School Corporation students, I agree to comply with the following directives:

- ✓ Authorize the release of information to complete a Limited Criminal History Check and National Sex Offenders Registry Check.
- ✓ Abide by all school rules and Maconaquah Board of School Trustees policies.
- ✓ Honor the commitment to work as scheduled. If I must be absent from a scheduled commitment, I will notify the appropriate person in advance.
- ✓ Communicate regularly with school personnel.

Signature: _____

Print name: _____

Date: _____