

Rising Sun-Ohio County Community Schools Volunteer Approval Form

(Requested information is necessary to process background check)

Name (First, Middle & Last): _____

Address: _____

Phone Number: _____ Date of Birth: _____ Gender: _____

State of Birth: _____

Race: Black Asian/Pacific Islander White
Multi-Racial American Indian or Alaskan Unknown

Classroom or Activity in which to Volunteer: _____

Day(s) of Week/Season: _____

Volunteer Statements-Please Initial Indicating Your Understanding

_____ 1. Rising Sun-Ohio County Community Schools appreciates your willingness to become part of our family. However, understand that your position can be terminated at any time for any reason.

_____ 2. Understand that the above information will be used to run a criminal background check at no cost to you.

_____ 3. You agree to keep confidential any student-specific information both academic and behavior that you may learn while volunteering for Rising Sun-Ohio County Community Schools.

Criminal Record	YES	NO
1. Have you ever been convicted of a felony?	_____	_____
2. Have you ever been convicted of a misdemeanor other than a minor traffic violation?	_____	_____

If answered yes to either question 1 or 2 attach a written explanation and provide court records.

I certify that the information and documentation contained in my application is true and accurate to the best of my knowledge and belief.

Signature of Volunteer _____ Date _____

Background Check Completed _____ Date _____

Approval of Administrator _____ Date _____