

Vista Unified School District
SCHOOL VOLUNTEER APPLICATION

Information provided on this form is confidential and will be used only for school Volunteer Program purposes.

DATE _____ SCHOOL Empresa Elementary School

FULL NAME _____
(First) (Middle) (Last)

ADDRESS _____
(Street) (City) (State) (Zip)

DATE OF BIRTH _____ HOME PHONE _____ WORK PHONE _____
Mo/Day/Yr

DRIVER'S LICENSE (Photocopy Driver's License and Attach)

DO YOU HAVE CHILDREN OR GRANDCHILDREN IN SCHOOL? ☐ Yes ☐ No

WHERE DO THEY ATTEND? _____

VOLUNTEER EXPERIENCE _____

INDIVIDUALS TO CONTACT IN CASE OF AN EMERGENCY:

1. _____
(Name) (Address) (Phone)

2. _____
(Name) (Address) (Phone)

Do you have any criminal charges pending against you?

☐ Yes ☐ No

Have you ever been convicted of a felony?

☐ Yes ☐ No

Have you ever been convicted of a sex or drug-related offense or crime of violence?

☐ Yes ☐ No

Mental Health License or Credential? If Yes, # _____

☐ Yes ☐ No

Are you required to register as a sex offender under Penal Code 290.95?

☐ Yes ☐ No

"I understand that the district may research my personal and professional background. I give my permission to have my personal and professional references researched and hold the district and any individuals providing the district with information harmless. I also understand that I may have a criminal history check run by law enforcement if I serve as a volunteer. It is possible that as a volunteer I may have more than occasional or infrequent contact with students. Under Penal Code 290.95 I am required to disclose to school officials if I am a registered sex offender. My failure to disclose this fact could result in my arrest, prosecution, and likely fine and imprisonment. By placing my name below, I declare under penalty of perjury, that I am not a registered sex offender, and that I have not suffered convictions for sex or drug related offenses or for crimes of violence, and there are no criminal charges pending against me. I agree to abide by the district's safety and health rules and regulations."

Print Name: _____ Signature: _____

Date: _____

For Office Use Only: Megan's Law check - Date _____ Initial _____ TB check - Date _____ Initial _____

VOLUNTEER CODE OF CONDUCT

As a volunteer, I agree to abide by the following code of volunteer conduct:

1. Immediately upon arrival, I will sign in at the principal's office or the designated sign-in station.
2. I will wear or show a volunteer identification whenever required by the school to do so.
3. I will use only adult bathroom facilities.
4. I agree to never be alone with individual students.
5. I will not solicit outside contact with students.
6. I will exchange home directory information only with parental and administrative approval and only if it is required as part of my role as a volunteer. I agree not to exchange telephone numbers, home address, e-mail addresses or other home directory information with students for any other purpose.
7. I will maintain confidentiality outside of school and will share any concerns that I may have with teachers and school administrators.
8. I agree to not transport students without the written permission of parents or guardians or without the expressed permission of the school or district.
9. I will not disclose, use, or disseminate student photographs or personal information about students, self or others.
10. I agree not to post, transmit, publish, or display harmful or inappropriate matter that is threatening, obscene, disruptive or sexually explicit or that could be construed as any form of harassment.
11. I agree not to engage in violent behavior, smoking, alcohol or controlled substance use, or possession of explosives or weapons while on school campus.
12. I agree only to do what is in the best personal and educational interest of every child with whom I come into contact.
13. I agree to report to the appropriate school site/district personnel when a student is in danger of hurting him/herself or others or being hurt by someone else.
14. I agree to treat all school personnel and students with dignity and respect.

I agree to follow the District Volunteer Code of Conduct at all times or cease student volunteering immediately.

Signature of School Volunteer

Date