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VOLUNTEER APPLICATION
Revised: 12.1.2018

A COPY OF A VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION. **PLEASE PRINT.**

Full Name (First, Full Middle, Last): _____

Maiden Name: _____ Volunteer Location(s) : _____

Address: _____

City: _____ State: _____ Zip: _____

How long have you lived at the current address: _____ If less than one (1) year, please provide prior address below.

Prior Address: _____

City: _____ State: _____ Zip: _____

Cell Phone & Other Phone: _____ Social Security Number: _____ - _____ - _____

Email Address: _____ Date of Birth: _____

Employer: _____ Occupation: _____

Do you have a valid Driver's License? YES NO

Driver's License Number: _____ State: _____

Special Certification (CPR, Medical, etc.): _____

Please answer the questions below and provide detailed answers as needed.

- 1) Have you ever been convicted of or plead guilty or no contest to any felonies, misdemeanors, crimes, or ordinance violations?
 YES NO If YES, describe each in full: _____

- 2) Are there any charges pending against you? YES NO If YES, describe each in full: _____

- 3) Have any charges against you (both pending and closed) involved or been against a minor? YES NO
If YES, describe each in full: _____

- 4) Have you ever been refused participation in any other youth programs? YES NO If YES, please explain: _____

Applicant Name: _____

AS A CONDITION OF VOLUNTEERING, I give permission for the School District of Menomonee Falls to conduct a background check on me, which may include a review of sex offender registries, child abuse, and criminal history records. I understand that, if appointed, my position is conditional upon the District receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the School District of Menomonee Falls, and its predecessors, successors, assigns, agents, directors, officers, employees, representatives, and all other persons acting by, through, under, or in concert with any of them from any and all claims, known or unknown. I also understand that, regardless of previous appointments, the School District of Menomonee Falls is not obligated to appoint me to a volunteer position. If appointed, I understand that I am subject to suspension by the District and removal by the Board of Education for violation of District policies or principals.

PLEASE READ EACH STATEMENT BELOW AND **INITIAL NEXT TO EACH STATEMENT** CONFIRMING YOU HAVE READ AND UNDERSTAND THE CONTENT. SIGN AND DATE BELOW.

_____ I have read the volunteer opportunities letter and understand my expectations as a volunteer.

_____ I understand that I may not share or discuss any information or facts about a student that are seen or heard at school with others. (Student Records Policy #347)

_____ I understand the responsibilities of the school staff are different than those of a volunteer, especially as it pertains to instructional and behavioral decisions.

_____ I understand that the School District of Menomonee Falls does not tolerate any discriminating or harassing behavior from students, staff, volunteers, or other individuals interacting with students. (Non-Discrimination Policy #411)

_____ I understand I am required to notify the building principal and the District Human Resources Department (262-255-8440) in the event of arrests, indictments, convictions, no content or guilty plea, or other adjudication for any felony or offense involving moral standards. If you are listed on a sex offender registry, you are required to disclose that information. A decision regarding whether you are able to volunteer at the school will be made by administration. An arrest or indictment shall not be an automatic basis for an adverse volunteer decision. The District reserves the right to suspend or remove volunteer privileges in its sole discretion based on the nature of conduct leading to arrest or indictment.

_____ I understand that I may be removed as a volunteer at any time, for any reason if I do not adhere to the contents contained in the volunteer letter or to all of the statements written above.

NON-DISCRIMINATION STATEMENT

The School District of Menomonee Falls does not discriminate against pupils on the basis of sex, race, color, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional, or learning disability or handicap in education programs or activities, and provides equal access to the Boy Scouts and other designated youth groups.

If any person feels there has been a discriminatory situation in regard to any of the above named classes or in violation of Title IX, Section 504, or Title ADA, please contact the building administrator or Kathy Young, Director of Pupil Services, at 262-255-8695 or at younkat@sdmfschools.org.

Applicant Signature: _____ Date: _____

Applicant Name (PLEASE PRINT): _____