

Delta County School District 50J
Volunteer Application

IMPORTANT INSTRUCTIONS: Please PRINT and use a PEN. All fields MUST be completed. The ORIGINAL must be returned to the District Office. Failure to follow these instructions may cause a delay in the approval from the School Board. **THIS FORM MUST BE COMPLETED BY THE VOLUNTEER SIGNING THE FORM.**

Date of Application: _____

Name: _____ Date of birth: _____
(Please Print): First Middle Last

Address: _____

City: _____ State: _____ Zip: _____

Telephone (home): _____ Telephone (work): _____

List two (2) references other than family members for your character.

Name of Reference #1 _____ Phone Number _____

Name of Reference #2 _____ Phone Number _____

I would like to volunteer at (school) _____ and (grade) _____

Hours and dates you'd like to volunteer: _____

Have you ever been convicted of:

_____ (a) a felony

_____ (b) any offense involving moral turpitude

_____ (c) a misdemeanor other than a minor traffic offense

_____ (d) received probation or entered into a plea of "no contest" (nolo contedere)

If yes, please explain: _____

Have you ever been convicted of a crime against a child? Yes _____ No _____

Do you have any physical limitations of which we should be aware? _____

Please Continue on Other Side

Delta County School District 50J
7655 2075 Road Delta, CO 81416
Phone: (970) 874-4438 Fax: (970) 874-5744

Revised 08/09

Delta County School District 50J
Volunteer Application

If in the course of your volunteer work, you receive information regarding suspected child abuse or neglect, the following procedure must be followed:

- Report any case of suspected child abuse or neglect to the building principal or immediate supervisor.
- All cases will be immediately reported to Delta County Social Services by the building principal or supervisor.
- At no time are you to investigate the suspected abuse or neglect. That is the responsibility of Delta County Social Services.

Delta County School District 50J will conduct a reference check including a criminal background check.

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if approved for volunteer work, falsified statements on this application shall be grounds for revocation of permission to volunteer in the school(s)."

Date: _____ Signature: _____

Principal Signature: _____ Date: _____

For Office Use Only: Order Date: _____ Order Number: _____ Added to Volunteer List for the month of: _____

Delta County School District 50J
7655 2075 Road Delta, CO 81416
Phone: (970) 874-4438 Fax: (970) 874-5744

Revised 08/09