



NORTH COLLINS CENTRAL SCHOOL DISTRICT

P.O. Box 740, North Collins, NY 14111

VOLUNTEER APPLICATION

Please submit this completed form to the District Office at the High School Building (address below).

The North Collins Central School District's volunteer program was developed to support District instructional programs and extracurricular activities. The purpose of the volunteer program is to:

1. Assist employees in providing more individualization and enrichment of instruction;
2. Build an understanding of school programs among interested citizens, thus stimulating widespread involvement in a total educational process;
3. Strengthen school/community relations through positive participation.

Volunteers are persons who are willing to donate their time and energies to assist Principals, teachers, and other school personnel in implementing various phases of school programs. Volunteers shall serve in that capacity without compensation or employee benefits except for liability protection under the District's insurance program. An application shall be filled out by each prospective volunteer and submitted for evaluation. All volunteers must be approved by the Board of Education.

Name (First, Last): _____

Address: _____

Email Address: _____

Phone Number (include area code): _____

Briefly state why you want to volunteer:

Have you previously volunteered at North Collins CSD? _____

If yes, for whom and which building? _____

Have you ever been convicted or pled guilty to a crime - either misdemeanor or a felony (including but not limited to child abuse, theft, drug charges or other crimes of violence)? _____

If you answered yes to the last question, please explain in detail.

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School where you would like to volunteer:

- Elementary
- Jr.-Sr. High School
- Both Elementary and Jr.-Sr. High School

Event or description of how you wish to volunteer: _____

Teacher or Grade level you wish to assist, if applicable: _____

Waiver:

By signing below, I do hereby certify that the facts set forth in the above volunteer application are true and complete to the best of my knowledge. I further acknowledge that any falsification or omission will be sufficient cause for disqualification. In the event that I am selected to be a volunteer, I agree to conform to and abide by the District's Code of Conduct and the District's rules and regulations. I will provide government-issued photo identification when requested.

Signature _____ Date _____

Office Use Only:

DISTRICT OFFICE DETERMINATION

Date Application Received: _____

Principal Approval? Yes _____ No _____

Teacher Approved? Yes _____ No _____

Waiver Signed? Yes _____ No _____

Approved by Superintendent? Yes _____ No _____

Signature of Superintendent: _____ Date: _____

Date Approved by Board of Education: _____