## VOLUNTEER APPLICATION AND PREFERENCE CHECKLIST SANTA ROSA DISTRICT SCHOOLS

If you have other children attending this school, completion of only one form is necessary.

Name:			
Phone Number:	(Work)	(Ce	ell)
Student Name(s):			
Teacher Name(s):			
	3 4 5	6 7 8	
I am available: Mo			
I am available: Morn Times(s):			
Health: Any physical limitation	ons:		
Special talents and skills I wou	d like to share:		
Education or special training:			
Age: Under 21		21-61	62 and Over
Special Categories of Voluntee	rs:		
Retired Seniors	College Students _	Middle/High S	chool students
Military	Parents	Other	
Make bulletin boa Read or tell stories Listen to students Help set up or sup Make instructional Work with audio-v Assist with the sup Provide clerical as Assist with the pre Assist with the sup	rds, posters and displays to students. read / practice skills. rervise learning stations. materials (flash cards, gavisual equipment. pervision of students on the	nmes, etc.) ne school campus. special projects. eld trips (chaperone	e).
	benefits in case of illness		ol System without compensation are approved to volunteer then in
Volunteer:			Date:
Signature of			
One reference who is not a rela	tive: Name:		
Address:		Phone:	

## SANTA ROSA COUNTY SCHOOL BOARD SECURITY BACKGROUND CHECK THIS FORM MUST BE TURNED IN WITH YOUR APPLICATION

Name:		Driver's License #						
Addres	s:		Phone: (Home)	(Work)				
Email:			DOB:	Cell:				
				l not necessarily disqualify you				
from co	onsideratio	on. However, Santa Rosa Cour	nty School Board reserves	the right to request that you be				
fingerp	rinted at y	our won expenxe prior to you	r approval to volunteer.					
Yes	No	1. Have you ever been convi (DUI and DWI conviction	cted of an offense other that are not minor and must					
Yes	No	2. Have you ever been found	guilty of a criminal offens	se?				
Yes	No	3. Have you ever entered a n	. Have you ever entered a nolo contender or no contest plea?					
Yes								
Yes	No	5. Have you ever entered a p charge?	re-trail intervention progra	am for a misdemeanor or felony a				
Yes	No	6. Are there criminal charges	currently pending against	you?				
Yes	No							
Yes	No	8. Have you ever failed to ap	pear in court or forfeited b	oond in a criminal proceeding?				
Yes	No	9. Have you ever been confin	med as a child abuser by t	he Department of Children and				
		Families or a similar agen-	cy in Florida or another sta	ate?				
followi Arrest:	ng space :	l "yes" to any of the question or on another page if extra s	pace is needed:	detailed explanation in the				
Arresti	ng Agenc	/:						
Date of	Arrest: _							
Offense	e:							
further any mis	certifies t srepresent reserves th		any information, omission . I also understand that the					
informa	ation requ	I certify that I know, understatested will result in my name be ool Board.		e statement or omission of proved volunteer list of the Santa				
		Application Signature		Date				

For Office Use Only: