



Volunteer Application

Approved Not Approved

Edwards Knox Central School

2512 County Route 24
Hermon, NY 13652

Please print in **black or blue ink**, or type. **Submit to the building principal**

Personal Information		Title: <input type="checkbox"/> Dr. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr.
* Last, First, and Middle Name:		Suffix: (Jr., Sr., III, etc.)
E-mail Address:		Home Phone #:
Address:		
* DOB: (mm/dd/yyyy) / /	*Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Alternative Phone #:

Safety Information				
To become an Edward Knox Central Schools volunteer, a criminal history check may be conducted. A prior criminal record may or may not result in your disqualification for volunteering; however, failure to disclose your record on the application WILL disqualify you from volunteering.				
* Have you ever been banned from school grounds? <input type="checkbox"/> Yes <input type="checkbox"/> No				
* Have you ever been convicted of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No				
*Are there any injunctions, charges currently pending against you and/or have you been placed on probation? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If the answer is "yes" to any of the above safety questions, you must provide information below: (If you have multiple convictions or need additional space, attach a separate sheet to this application, along with court documents, police report and a detailed letter of explanation).				
Nature of Charge	Date (mm/dd/yyyy)	City, County, State, Country	Level of Offense	Disposition/Outcome

Employer List below your current, or last employer		
DATE, MONTH and YEAR	NAME AND ADDRESS OF EMPLOYER	POSITION
From		
To		

Reference List below three persons not related to you, whom you have known at least one year.		
NAME	ADDRESS & TELEPHONE NO.	YEARS ACQUAINTED

What volunteer services are you willing to perform?

My signature below permits the District to contact any or all references listed and perform a background check, if necessary.
Date _____ Signature _____

This form needs to be completed each year.
Thank you for your dedication and commitment to our children!

Implementation of the Volunteer Program -

- I. General administration of the volunteer program in the District shall be the responsibility of the Superintendent or his/her designee.
- II. The need for volunteers will be determined by the building principal in cooperation with the faculty and other personnel as may be appropriate.
- III. An application shall be filled out by each prospective volunteer and forwarded to the District Office for evaluation. All regularly scheduled volunteers will, at a minimum, complete an application, provide authorization for a reference check, and shall be screened and interviewed by the building principal or his/her designee. Occasional volunteers will be screened by the building principal in a manner of his/her choosing. Fingerprints may be required depending on the extent of the volunteer's position. NY State Law requires finger printing of any individual solely responsible for a group of children.
- IV. The building principal will forward his/her decisions concerning selection, placement and replacement of volunteers to the Superintendent for final evaluation. Following approval from the Superintendent of Schools, volunteers selected for work in the District shall be placed on the list of approved volunteers. However, the Superintendent retains the right to approve or reject any volunteer application submitted for consideration.
- V. Principals shall assume final responsibility for the assignment of volunteers from the approved list as needed. Assignment of a volunteer must be acceptable to the staff member to whom the volunteer will be assigned.
- VI. Orientation and in-service training will be provided by appropriate staff as determined by the principal.
- VII. Volunteers will work under the supervision and direction of appropriate staff and are expected to comply with all rules and regulations set forth by the District.
- VIII. So that appropriate recognition may be made from time to time, an accurate list of volunteers shall be kept by each principal or supervisor and forwarded to the Superintendent. Additionally, a copy of each building's volunteer registry file will be forwarded to the Personnel Office in order to keep a complete listing of all school volunteer personnel.
- IX. The District does not carry health/accident insurance or Workers' Compensation on volunteers. They are covered for their actions or omissions within the scope of their approved authority under the liability section of the District's umbrella policy. However this is not the case for visitors to the school who do not act in a volunteer capacity.
- X. Volunteers must sign in and out in the school office or alternate area designated for this purpose, unless determined otherwise by the building principal.
- XI. Principals shall assume the same general authority over volunteers in their school as they maintain over the employees of their building.
- XII. Each school will keep a volunteer registry file which will include, but not be limited to, the following information: Name, address, telephone number, employer, references.
- XIII. Volunteers must wear appropriate identification to insure immediate recognition as persons whose specific purpose is helping students and staff. Appropriate identification will be determined by the Superintendent or building principal/supervisor, or designee.