VOLUNTEER APPLICATION (EXCLUDING AUTHORIZED CERTIFIED COACHES) JACKSON COUNTY SCHOOLS RIPLEY, WEST VIRGINIA 25271

Please complete the volunteer application and return it to the principal of the school where you wish to volunteer. If your application is approved by the school principal, it along with other required documentation, will be forwarded to the Superintendent's Office for further consideration. Your application will be submitted for a criminal background check as well as checked with the sexual offender registry list provided by the WV State Police. <u>School volunteers are not permitted to perform any volunteer duties until they receive an approval letter from the Superintendent's Office and have been provided an orientation session by the school principal or designee.</u>

School Year 20 20	0			
SCHOOL		Date:		
Name:(Full legal r	name including N	Maiden name)		
Address:		City	Zip Code:	
Telephone:		E-Mail:		
Your Student's Name (i	f applicable)		Grade Level:	
Have you ever been co				
Yes	🗌 No	If yes, attach full expla	anation.	
Are there any court doc in contact with your child		rce that prevent you from	n being on school premises or being	
Yes	🗌 No			
Are you listed on the Se	ex Offender F	Registry?		
Occupation:				
Last School Attended: _			Degree/Diploma:	
Reference (Please do n	ot list relative	es):		
Name		Address	Telephone	
		* * * * * *		
I certify that all informat	ion given on	this application is true ar	nd correct.	
Volunteer's Signature _			Date:	
			is of sex, race, color, religion, age, disability, cational programs and activities	

JC-7/8120f1

JACKSON COUNTY SCHOOLS

The undersigned, herein referred to as "Volunteer," hereby expressly stipulates and agrees with the Board of Education, County of Jackson, State of West Virginia, hereinafter called "Board," that this agreement does not constitute a contract of employment; that the services of the Volunteer are gratuitous to and for the benefit of the public schools of Jackson County, West Virginia; that the Board has made no promise or agreement whatsoever, express, or implied, to compensate, remunerate or pay Volunteer for such services and; further, Volunteer expressly covenants that he/she will make no claim against the Board for his/her services to said school system. The Volunteer understands that this application will undergo a criminal background check as well as the sexual offender registry list provided by the WV State Police. The Volunteer understands that a volunteer application must be submitted once per school and completion of required training is every three (3) years per Jackson County policy 8120. The Volunteer understands that the principal may discontinue volunteer status at anytime. The Volunteer understands that as a school volunteer that s/he is not authorized by Jackson County Schools to impose discipline on students. The Volunteer understands that s/he must wear an identification designating s/he as a "Volunteer" while performing volunteer duties. The Volunteer understands that their services as a school volunteer may be terminated at any time, either verbally or in writing, by the principal or superintendent.

Volunteer Name:	
Volunteer Name:(Please	Print)
I have completed Required training(s) per Jac	ckson County Policy 8120
Signature:	Date:
* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
(For school of Required Training Review:	fice use only)
Required training(s) completed per Ja	ackson County Policy 8120Reviewers Initials
WV State Police Sex Offender Registry Review	v (https://apps.wv.gov/StatePolice/SexOffender):
No Record 🛛 Record on File	Reviewers Initials
Principal Recommendation:	
Recommended for approval Not recommended	mended for approval
Principal's Signature:	Date:
* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
(County Offic Criminal Background Check Review:	ce Use Only)
No Record Record on File	Reviewers Initials
Superintendent:	
Approved Not Approved	
Superintendent's Signature:	Date:
Jackson County Board of Education Approva	I Date:
9/23 wph	

JACKSON COUNTY SCHOOLS AREA(S) OF INTEREST

Volunteer's Name:				
Telephone:	E-Mail:			
School Location(s) for Volunteer Assignment:				
Teacher(s) or Department(s)				
Days/Hours Unavailable to Volunteer:				

INSTRUCTIONS: Please indicate areas of interest:

- □ assist school office as receptionist
- □ assist school secretary with clerical tasks
- □ assist in the school library
- \Box assist with school events, field trips, and projects
- □ assist with school beatification projects
- □ assist teachers with special needs students
- assist with school health program under the supervision of the school nurse
- decorate bulletin boards, create displays and learning centers
- assist school personnel in monitoring hallways, cafeteria, and/or playgrounds
- □ WV Read Aloud volunteer (must be registered with WV Read Aloud program)
- tutor individual students or small groups of students
- ☐ transport student(s) as requested by principal. (Must be approved by the superintendent please attach Form JC-7A and submit with this volunteer application)
- other (please specify) ______