



STANFIELD SCHOOL DISTRICT 61-R VOLUNTEER APPLICATION

Date: _____

Name: _____
Last First Middle

Activity Applying For: _____

PERSONAL INFORMATION

Present Address: _____

Mailing Address: _____

Phone _____ Driver's License No. _____

Cell No. _____ Email Address _____

Social Security No. _____

Required:

Have you ever been convicted of:

- | | | |
|---|-----|----|
| A. A sex-related crime which involved force or minor(s)? | Yes | No |
| B. A crime involving violence or the threat of violence? | Yes | No |
| C. A crime involving criminal activity in drugs or alcohol? | Yes | No |
| D. Any other conviction other than a minor traffic violation? | Yes | No |

If yes, conviction occurred: Date: _____ Country: _____ State: _____

If yes to any of the above, please explain or attach an explanation:

REFERENCES

Give three references including superintendents and principals, for whom you coached who have firsthand knowledge of your character, personality and coaching ability.

Name	Current Address	Phone Number	Official Position
------	-----------------	--------------	-------------------

PERSONAL STATEMENT

Please complete a short statement about yourself, why you are applying to volunteer at Stanfield School District.

I understand the making of any false statements on this application will be sufficient cause for not being hired or immediate dismissal regardless of the date such may be discovered by the district. I hereby guarantee the correctness of all statements on this application.

Signature of Applicant	Date
------------------------	------

Principal's/Superintendent's Signature	Date
--	------

EDUCATE. EMPOWER. INSPIRE.

Revised 03/30/2022