



# PYRAMID LAKE JR./SR. HIGH SCHOOL

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Nixon, Nevada 89424  
Telephone: (775) 574-1016 Ext. 1005  
Fax: (775) 335-1047

<b>FOR HUMAN RESOURCES USE ONLY:</b> _____ _____ _____ _____
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## VOLUNTEER APPLICATION

**PLEASE COMPLETE ALL REQUESTED INFORMATION IN INK OR TYPING. INCOMPLETE APPLICATIONS WILL BE REJECTED.** Thank you for your interest in volunteering with the Pyramid Lake Jr. /Sr. High School. In an effort to keep our students safe, we ask that you take a few moments to complete this volunteer application form. NOTE: Any applicant found to be a registered sex offender, on an active warrants list, on a terrorist list, or on probation or parole WILL NOT BE ALLOWED TO VOLUNTEER at PLHS.

Volunteer Position(s): \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last Name, First Name, Middle Initial – ENTER EXACTLY AS SHOWN ON PHOTO IDENTIFICATION)

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: (Street, City, Zip Code)

Mailing Address: \_\_\_\_\_  
(If Different from above – Street/ PO Box, City, State, Zip Code)

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Last four digits of Social Security Number: \_\_\_\_\_

I am a (check all that apply):  
 Parent/Guardian of a Student  Other Family Member/Caretaker  
 Community Volunteer

Employee If you are a parent/guardian or caretaker, please list student and teacher name(s):  
\_\_\_\_\_

If you are volunteering as part of a community organization/business member, list the name(s) of the business/organization:  
\_\_\_\_\_

If you ARE NOT a parent/guardian or caretaker, please provide two (2) NON-RELATIVE REFERENCES:

1. \_\_\_\_\_  
(Name, Relationship, Phone Number)

2. \_\_\_\_\_  
(Name, Relationship, Phone Number)

HR USE ONLY  
\_\_\_\_\_  
Initial: Reference Checked  
HR USE ONLY  
\_\_\_\_\_  
Initial: Reference Checked

In Case of Emergency contact: \_\_\_\_\_  
(Name, Relationship, Phone Number)

Have you ever been convicted of a misdemeanor, gross misdemeanor or felony? Yes  No   
(Excluding juvenile adjudication)

**The Crime Control Act, PL 101-647, and Indian Child Protection & Family Violence Prevention Act, PL 101-630, of 1990 requires the following questions of persons applying for positions that involve regular contact with or control over Indian children:**

Have you ever been arrested or convicted of a crime involving a child? Yes  No

Have you ever been arrested or convicted of, or entered in a plea of nolo contendere (no contest) or guilty to, any offense under Federal, State, or tribal Law involving crimes of violence, sexual assault, sexual molestation, sexual exploitation, sexual contact or prostitution, or crimes against persons? Yes  No

**(If yes, please explain the date, violation, disposition of the arrest or charge, place of occurrence, and the name and address of the police department or court involved. \_\_\_\_\_**

VOLUNTEER COMMITMENT AND PROCEDURES

*For the safety of students*, all prospective volunteers will be asked to complete a Volunteer Application and provide a photo I.D. (international ID's are accepted). All prospective volunteers will be given a "Background Check". Additionally, PLHS, in its discretion and without a statement of reason, may require a complete criminal history check on any volunteer at any time. In programs where a volunteer is an Overnight Chaperone, may work alone for extended periods of time with a student or by request from the program director, fingerprinting and a full state and federal background check are required. All fingerprinting must be authorized.

*Confidentiality:* What you hear and observe about students, families, and staff while volunteering is confidential. Repeating a seemingly harmless comment can lead to misunderstandings and hurt feelings. For us to provide the best environment for our children, everyone's privacy must be respected.

*Volunteers* perform under the discretion and supervision of PLHS employees. Volunteers should know and follow applicable policies and rules. PLHS, in its discretion and without a statement of reasons, may suspend any volunteer from further volunteer activities pending any background check.

*I affirm that I have read and understand all the information on this Volunteer Application and that all the information I have provided in this application is true and complete to the best of my knowledge. I understand that the Background Investigator reserves the right to verify all information on this application form and that any false statements or failures to disclose information may be sufficient to disqualify me as a volunteer. I hereby authorize The Background Investigator to obtain information relating to my current and/or previous employment, education, and personal history records.*

\_\_\_\_\_  
VOLUNTEER SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

**\*\*\*OFFICIAL USE ONLY\*\*\***

Picture ID Check: \_\_\_\_\_

Drug Test Completed: \_\_\_\_\_

Background Submitted: \_\_\_\_\_

**FOR HUMAN RESOURCES USE ONLY:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have reviewed the disclosed information above and ACCEPT: \_\_\_\_\_ DO NOT ACCEPT: \_\_\_\_\_ this applicant as a volunteer on our campus.

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
DATE

\_\_\_\_\_  
HUMAN RESOURCES MANAGER SIGNATURE

\_\_\_\_\_  
DATE