

School Use Only
 School Board Approval

 FDLE Sexual
 Offenders/Predators
 Checked _____
 Application completed at:

Dixie District Schools

SCHOOL VOLUNTEER APPLICATION

2011-2012

EXPIRES ANNUALLY

This application will not be processed unless all sections are completed and the application is signed and dated.

**Sheriff's Department
 Use Only**
 No Record
 Record
 Officer: _____
 Date: _____

PLEASE PRINT

NAME: Miss _____
 Mrs. _____
 Mr. Last First MI

SOCIAL SECURITY #: _____ / _____ / _____

ADDRESS: _____
 Street City State Zip

DRIVERS LICENSE #: _____

TELEPHONE: _____
 Home Work

DATE of BIRTH: _____

How long have you lived in Dixie County? _____ Previous Residence: _____

Occupation: _____ Employer: _____

Age Category: Under 20 21-49 50+ Sex: F M

Student Volunteer: DCHS LCCC Other: _____

Which of these terms best describes you?

White Black Hispanic Asian or American Indian or Multiracial
 not not any race Pacific Alaskan Native
 Hispanic Hispanic Islander



List all public schools in Dixie County your children currently attend
ONLY ONE FORM REQUIRED TO VOLUNTEER COUNTY-WIDE

<u>School Name</u>	<u>Child's Legal Name</u>	<u>Grade</u>	<u>Teacher's Name</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

My relationship to children: _____

TYPE OF VOLUNTEER WORK

Check all that apply.

- Classroom Field Trip Only Booster Club Reading Program Other In-School _____
 Mentoring Program (Middle and High School Only)

1. Have you ever been convicted or had adjudication withheld in a criminal offense other than a minor traffic violation or are there any criminal charges pending against you other than minor traffic violations? (DUI is **NOT** considered a minor traffic violation.)
 Yes No
 If yes, please explain: _____

2. BY SIGNING, I agree to abide by the policies and/or procedures of the School Board of Dixie County, Florida, and of the Volunteer Program, and the individual school in which I serve. I understand that the Volunteer Program reserves the right not to place me or to discontinue the use of my services as a volunteer. I also agree for the Dixie County Sheriff's Department to conduct a background check.

VOLUNTEER SIGNATURE: _____ DATE: _____