SCHOOL VOLUNTEER REGISTRATION FORM Oregon City School District

All school district volunteers must complete this registration form <u>each school year</u> before they will be able to volunteer in a school or at a school-sponsored activity. For your safety, and that of our students, a BACKGROUND CHECK will be completed on all volunteers. <u>Please type or print clearly.</u>

Legal Name:	Date of Birth: Sex:		Sex:
List ALL other names previously used, including maiden name:			
Driver License or Identification Card Number:			Expiration Date:
Address:Full Street Address			
Full Street Address City:	Ctata		7in:
If you have lived at the above address for less than 7 years, please			
	•	(es), for past 7 y	rears.
Address:Full Street Address			
City:	State:		Zip:
Address: Full Street Address			
City:	State:		Zip:
Home Phone:			
Alternate/Cell Phone:			
Are you currently an employee of Oregon City School District?] Yes	
If yes, please indicate occupation and building/department: _			
Are you currently a student in an Oregon City School?	[] No [] Yes Where	?
School(s) where you wish to volunteer:			
Do you have students attending this/these school(s)?	[] No [] Yes	
Have you EVER been convicted or pled no contest in a criminal offinow pending against you other than minor traffic violations? If <u>YES</u> , please list: ALL offense(s) and the disposition of the case(s case pending], dates(s) of conviction, and the location (state and conviction).	[] No []. [Example: ruled guilt] Yes y, paid fine, ple	d no contest, under diversion,
	Date of Conviction		(State & County)
Volunteer Expectations All volunteers working within the Oregon City School District shall: Sign in and out at the school front desk and wear a Abide by all school rules and applicable Board of E Attend orientation or training sessions as applicable materials on District website; Keep all student information confidential.	ducation policies and r	egulations.	olunteer orientation
By signing below, I agree to the rules and regulations of the volunt involvement with students shall be under staff supervision and is responsored activity. Furthermore, I hereby grant to the Oregon City any statement made on this form. Regardless of whether the applicariminal offender record check of applicants for volunteer positions his/her criminal history for inaccurate or incomplete information. Fadisqualification. I acknowledge reading and receipt of this notice.	stricted to the school of School District permis cant grants consent, the working with or around	lay, on the scho sion to check ci se Oregon City S d children. The	ol grounds, or at school- vil or criminal records to verify School District will conduct a applicant is entitled to review

Date:

Rev. 6/2012

Applicant's Signature:_