

KANAWHA COUNTY BOARD OF EDUCATION POLICY

Volunteers in the Schools

Series: C55 Reference: W.Va. Code §18-5-13 Issued: 06.17.2004 Revised: 01.20.2005

**APPLICATION FOR PARTICIPATION AS A VOLUNTEER IN KANAWHA COUNTY SCHOOLS**

Department of Human Resources, 200 Elizabeth Street, Charleston WV 25311

Phone: (304) 348-7753 Fax: (304) 348-7711

Kanawha County Schools is an Equal Opportunity Employer and Complies with the Provision of the Americans with Disabilities Act.

**Print Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
Last First MI

**Address:** \_\_\_\_\_

**SS Number:** \_\_\_\_\_ (this information is used solely to verify identity)

**Provide any other names by which you have been known:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**List of states in which you have lived (other than West Virginia) and approximate dates:**

State: \_\_\_\_\_ Dates: from \_\_\_\_\_ to \_\_\_\_\_

State: \_\_\_\_\_ Dates: from \_\_\_\_\_ to \_\_\_\_\_

State: \_\_\_\_\_ Dates: from \_\_\_\_\_ to \_\_\_\_\_

**Name of school at which you want to volunteer:** \_\_\_\_\_

**Have you volunteered in other schools or school system?** \_\_\_\_ Yes \_\_\_\_ No

**If yes, which school/system?** \_\_\_\_\_ **Dates of service** \_\_\_\_\_

**Volunteer Activity:** \_\_\_\_\_

**Have you ever been convicted of or paid a fine for any offense (including felonies, misdemeanors, or ordinance violations) or do you have any charges pending, other than minor traffic violations?**

\_\_\_\_ Yes \_\_\_\_ No

**If yes, list details below. Use separate sheet if necessary. (NOTE: Convictions are not an automatic bar to participation as a volunteer. Each case is considered on its own merit. A conviction not reported can be cause for rejection of an application or dismissal).**

Date	Location	Charge	Court	Disposition of Charge
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Have you ever been dismissed or asked to resign from any position?** \_\_\_\_ Yes \_\_\_\_ No

**If yes, please explain:** \_\_\_\_\_

\_\_\_\_\_

**CERTIFICATE OF APPLICANT:** I authorize Kanawha County Schools to make any inquiry of or receive information from any person or organization regarding my suitability as a volunteer and do hereby give permission to these persons or organizations to provide such information. Such inquiries may include and not be limited by enumeration to the quality and quantity of my work, work history and record, character, qualifications, and records of convictions. For and in consideration of the release of such information, I hereby forever waive, release, and covenant not to sue any person or organization including Kanawha County Schools, its agents and employees for the result of providing, obtaining, or acting upon such information. I give this waiver, release, and covenant not to sue for myself, my heirs, assigns, and successors in interests forever. I give this waiver, release, and covenant not to sue understanding that the information obtained may be such as to disqualify me from participation as a volunteer. I understand that such information is sought with confidentiality, and I will not request copies of such information. I also certify that all statements made on this application are true and complete, accurate and not misleading to the best of my knowledge. I understand that any false statements, incomplete statements, or misrepresentations may subject me to disqualification or dismissal. A copy of this authorization shall be effective as the original.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Do you have a child attending Kanawha County Schools?** \_\_\_\_ Yes \_\_\_\_ No

**Child/Children's name(s):** \_\_\_\_\_

**School(s):** \_\_\_\_\_

**Professional References – minimum of 3 (include address and telephone number):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Why do you want to volunteer?** \_\_\_\_\_

**Are there any restrictions that would limit your volunteer activity?** \_\_\_\_ Yes \_\_\_\_ No

**If yes, explain:** \_\_\_\_\_

**At which level do you wish to volunteer?** Elementary    Middle School    High School

**Person to notify in case of emergency (name and phone number):** \_\_\_\_\_

**Recommendation of Principal:**

Principal Statement: I have interviewed this individual and recommend that they can be endorsed as an unpaid volunteer to do the following activities: \_\_\_\_\_

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date