



Hillsborough County Public Schools
2013 – 2014 Volunteer Application
 Please complete application fully, and return to:
 The school where you will be volunteering

SOP	Date	Initial
HCSO	Date	Initial
DOC	Date	Initial

LEGAL Name _____
 Last First Middle Name (Not initial) Maiden Name

Home Address _____ **How long?** _____
 Number and Street City State Zip

Previous address if less than 5 years _____

Name & Address of Employer _____
 _____ **How long?** _____ **Occupation** _____

Home Telephone _____ **Business** _____ **Fax** _____

Cell Phone _____ **E-mail Address** _____

Date of Birth (required) _____ **Do you have a student in Hillsborough County schools?** Yes No

School(s) _____

Student's Name(s) _____

Grade(s) _____ **Teacher(s)** _____

Are you a student? Yes No **School** _____

<u>Gender</u>	<u>Ethnic Origin (Optional)</u>	<u>Volunteer Category</u>
<input type="checkbox"/> Female	<input type="checkbox"/> African American	<input type="checkbox"/> Classroom Helper
<input type="checkbox"/> Male	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Tutor
	<input type="checkbox"/> Caucasian White	<input type="checkbox"/> Mentor (Please complete page 2)
	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Chaperone/Day
	<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Chaperone/Overnight (Fingerprinting required-additional fee)
	<input type="checkbox"/> Other	<input type="checkbox"/> Other _____

Marital Status

Married

Single

Widowed

Separated

Divorced

School you prefer & grade level: _____

Highest Level of Education Completed: _____

Special skills, languages or hobbies: _____

I understand that I am offering my services to the Hillsborough County Public School System without compensation. I certify that all information given on this application is true and complete. Any misrepresentation, omission or incorrect statement of facts called for in this application is cause for immediate dismissal of me as a volunteer. I agree, if I am a volunteer, to abide by all school board rules, regulations and policies, either published or in effect by usage and all rules, regulations and laws of the State of Florida as may be required by Florida Statutes and the School Board of Hillsborough County.

Have you ever been convicted, pled no contest, or had adjudication withheld in a criminal offense, felony, misdemeanor or are there any criminal charges now pending against you other than a minor traffic violation?
 Yes _____ No _____ **If Yes, Please provide a brief explanation on a separate sheet of paper.**

Would you agree to an employer/criminal background check? Yes _____ No _____

SIGNATURE OF VOLUNTEER APPLICANT: _____ **DATE** _____

Hillsborough County Schools Volunteer Application

Page 2

LEGAL Name _____
Last First Middle Name (Not initial) Maiden Name

Social Security Number _____

References: Please list four persons who know you well and would be in a position to evaluate your qualifications and ability to be a mentor. Do not list relatives, significant others or those you have known less than two years. One of the references should have known you for at least five years and the others for at least two years. If you have been employed at your current place of employment for at least six months, list your supervisor as one of your references.

1. _____
Name Address
() ()
Telephone: Home Work Fax Years known

2. _____
Name Address
() ()
Telephone: Home Work Fax Years known

3. _____
Name Address
() ()
Telephone: Home Work Fax Years known

4. _____
Name Address
() ()
Telephone: Home Work Fax Years known

List previous work with youth or other volunteer activities:

Have you ever applied to become a mentor before? If yes, When? _____
Where? _____ With whom? _____

<p>FOR OFFICE USE ONLY: _____ New Volunteer _____ Returning Volunteer</p> <p>Background Check: <input type="checkbox"/> N/A <input type="checkbox"/> Record Found <input type="checkbox"/> No Record</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Denied</p> <p>School # _____ Name _____</p> <p>Interview by _____</p> <p>Was this a district office referral? Yes _____ No _____</p> <p>Volunteer placed? Yes _____ No _____ Date _____</p> <p>Training provided by: _____</p> <hr/> <p>Volunteer withdraw/Termination Date _____</p> <p>Reason: _____</p>
