

# RANDOLPH COUNTY SCHOOLS CONTINUING VOLUNTEER APPLICATION

School: \_\_\_\_\_ School Year: \_\_\_\_\_

**Applications must be submitted to the school and approved by the principal**

**Contact Information:**

\_\_\_\_\_  
Last Name First Name Middle Initial

\_\_\_\_\_  
Home Address City State Zip

\_\_\_\_\_  
Home Phone Cell Phone E-mail

**Relationship of volunteer to students:**

Parent/Guardian: \_\_\_\_\_ Family Member: \_\_\_\_\_ Community Member: \_\_\_\_\_

**Type of activities for which you wish to volunteer:**

Classroom Activities: \_\_\_\_\_ Special Events: \_\_\_\_\_ Special Projects: \_\_\_\_\_ Read Aloud Program: \_\_\_\_\_

**Parents/guardians and family members of students enrolled here must complete the chart below.**

Name of Child	Grade of Child	Name of Child's Teacher

**How often do you wish to volunteer?**

Weekly: \_\_\_\_\_ Every Other Week: \_\_\_\_\_ Monthly: \_\_\_\_\_ As Needed: \_\_\_\_\_

**When are you available to volunteer? (Check all that apply.)**

Any time: _____	As Needed: _____
Monday A.M. _____	Monday P.M. _____
Tuesday A.M. _____	Tuesday P.M. _____
Wednesday A.M. _____	Wednesday P.M. _____
Thursday A.M. _____	Thursday P.M. _____
Friday A.M. _____	Friday P.M. _____

**VOLUNTEER COMMITMENT AND PROCEDURES**

Confidentially: 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. Parents should never be in the Permanent Record Files or Emergency Care Forms.

Board policies and county guidelines: Volunteers must abide by policies and guidelines.

Supervision: Volunteers perform under the direction and supervision of school personnel. Volunteers should never be left in charge of children alone. Volunteers should never discipline the students.

Dress & Behavior: Volunteers must display appropriate behavior and appearances at all times.

Communication: If you are unable to make it to school when you are scheduled, please call the school.

**Do you have a criminal conviction record?** Yes: \_\_\_\_\_ No: \_\_\_\_\_ \*If yes, attach explanation.

**By signing below, you certify that you have read and understand the provisions of being a volunteer.**

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature of Principal** \_\_\_\_\_ **Date** \_\_\_\_\_