PINELLAS COUNTY SCHOOLS

VOLUNTEER REGISTRATION FORM

Please **PRINT** legibly and complete the entire form, front and back.

Please ATTACH A COPY OF YOUR LEGAL/GOVERNMENT ISSUED PHOTO ID will be kept on file.

LEGAL NAME as it appears on								
your photo ID	LAST NAME		FIRST NAME		MIDDLE NAME		MAIDEN NAMES	
SOCIAI	L SECURITY	NUMBE	R	GEI	NDER	DA	TE OF BIRT	Ή
_	-	-		_ Male	Female	-	-	
						нтиом нтис	DAY DAY	YEAR YEAR
\\/\bi+o	DI			LL THAT APPL		ممالمطامم	ar Alaaka Ni	otivo
White Black or African American Hispanic/Latino			1	American Indian or Alaska Native Native Hawaiian or Other Pacific Islander				
/\sian			LEGAL PI	HOTO ID		- Hawanan C	or Other Fac	
Driver's License (Stat	te)				Number			
Identification Card (State)				DL/ID Number DL/ID Expiration				
Military IDPassport			Foreign ID (Country) & #					
,	•							
Home Address:	STREET		APT#	CITY		STATE		ZIP
Previous Address (if less	than 5 years) _							
		5	STREET	APT#	CITY		TATE	ZIP
Home phone:		Work Phone	e:	=	_ Alternate F	Phone:		
E-mail Address:					p. accoun	t ID:		
Employment or Organiza	tion represented	:						
Are you currently an emp	oloyee in Pinellas	County Sc	hools?	No _	Yes Occi	upation:		
School at which you wan	t to volunteer: _							
Are you currently a stude	ent in a Pinellas (County Scho	ool?	_ No _	_ Yes Whe	re?		
Emergency Contact:			_	P	hone:			
Days & Times Available t	o Volunteer:							
Do you	have a child/ch	ildren atte	nding this S	chool?	No _	_ Yes		
CHILD'S FULL NAME	E TE	ACHER	GRADE	CHILD	'S FULL NAME		TEACHER	GRADE
CHILD'S FULL NAME	E TE	ACHER	GRADE	CHILD	'S FULL NAME		TEACHER	GRADE
		l am interes	sted in the f	ollowing plac	ements:			
Mentor	Tutor			Field Trip Driv	er (proof of in	nsurance &	DL required	d)
_ Doorways	Elem _	subject	_	Chaperone	PT	ΓA/SAC	_ Cle	rical/Office
5000 Role Model	Middle _			Booster: (list o				dia Center
Other		_	_	(,			
		_		Other:				
	CaroarNa	luntoer Ex						
		<u>_</u>		ents/Languag tions on reve		Seidac		
		15455 41151						

All school volunteers must complete this registration form to volunteer in Pinellas County Schools. For your safety, and that of our students, a background check will be completed on all volunteers.

The School Board of Pinellas County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, sexual orientation or disability in any of its programs, services or activities.

YOU MUST COMPLETE AND SIGN THIS REGISTRATION FORM BEFORE WE CAN PROCESS IT.

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Have you ever had any altercation with any Law Enforcement Agency, pled nolo contendre or no contest to a charge, had an adjudication withheld, entered a Pre-Trial Intervention or Diversion program, had any offenses dropped or dismissed, been arrested or served time in jail, been convicted of a felony or misdemeanor, received a criminal traffic citation (including a DUI, driving with a suspended license and careless or reckless driving), or any criminal charge against you in the past (no matter how long ago) or have any charges now pending other than minor traffic violations. Also include any sealed or expunged convictions and any convictions or confirmations of child abuse or neglect.								
If NO , and after a background check	k, we find offenses, you will not b	e eligible to volunteer.						
If YES , please list: all offense(s) and the disposition of the case(s) [example: ruled guilty, paid fine, pled no contest, accepted adjudication, PTI/PTD, etc.], date(s) of offense(s), and the location (state and county) where offense(s) occurred.								
List ALL Offenses	Disposition	Date of Offense(s)	Location (State & County)					
Pinellas County Schools has a responsibility to its students, staff and visitors. In this regard, all individuals desiring volunteer assignments on our campuses (our facilities) are required to complete a Volunteer Registration Form. Pinellas County Schools reserves the right to refuse volunteer assignments to any individual whether or not he or she has been convicted of any offense. In completing this public document, please understand Pinellas County School's sincere concern for the safety of its students, staff and visitors.								
By signing below, I agree to the rules and regulations of the volunteer program and that any product produced while a volunteer shall be the property of the School Board (a work for hire). I understand that all involvement with students shall be under staff supervision and is restricted to the school day, on the school grounds, or a school-sponsored activity. I also understand volunteers are not employees or personnel of the school board. My signature below certifies that I have reviewed the criminal offense statement and responded truthfully. FALSIFICATION OR OMISSION OF THIS OFFICIAL PUBLIC DOCUMENT IS A CRIMINAL OFFENSE, CAN BE PROSECUTED, AND WILL CONSTITUTE GROUNDS FOR VOLUNTEER DISQUALIFICATION. I agree to maintain the CONFIDENTIALITY of student's information.								
X	EER SIGNATURE		DATE					
	The Pinellas County School Board is a public agency and subject to the Florida Public Records Act. All records, with certain							
VOLUNTEER ELIGIBILITY Policy The District Office will review all offenses to determine the outcome of your Volunteer Status and reserve the right to determine your eligibility status.								
 felony child abuse. MAY NOT VOLUNTEER IF CON (including trafficking or delivery) c MAY NOT VOLUNTEER IF CONV 	VICTION WAS WITHIN THE LAG of controlled substances. ICTION WAS WITHIN THE LAST	ST 25 YEARS for felo	felony crimes and any misdemeanor					
misdemeanor crimes involving we • LIMITED VOLUNTEER: May volun	ICTION WAS WITHIN THE LAST ation of injunction for protection apons. Worthless Checks – will be teer, but MAY NOT DRIVE students in the last ten years. MAY NEVER D	5 YEARS for felony the against domestic vice considered on a case for DUI conviction within DRIVE students if volunters.	neft/economic crimes, misdemeanor blence), misdemeanor drug crimes, se by case basis. In the past five years. MAY NOT DRIVE per has three or more DUI convictions.					
Date								
School Name:	New Volunteer	Returning Volunt	eer Date entered into Portal					

__ Copy of Legal/Government photo ID ____ Legal Name/Birth date verified ____ FDLE/Badge Pass check complete

_ If criminal offenses are listed, sent to District Office on: ______