

# Onsted Community Schools Volunteer Application

## 2025-2026 School Year

To protect your privacy, this form will only be seen by designated Onsted Community Schools' representatives. Only contact information will be shared with the appropriate staff related to your volunteerism. Please note that each question is important for the criminal background check. This information is necessary to ensure that we receive only your particular information. **Please fill out completely.**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Previous married/maiden name(s): \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Description of Volunteer Position \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Names of any children/grandchildren attending OCS and relationship:

Have you previously volunteered at OCS? Yes / No

Have you previously been denied the opportunity to volunteer at OCS? Yes / No

Are you a registered sex offender? Yes / No

Have you ever been convicted of **or** pleaded guilty to a felony or misdemeanor? Yes / No

If yes, describe the offense(s), date(s) and location(s):

Are you the subject of a current criminal or child protective services investigation or do you have any pending criminal charges against you? Yes / No

If yes, describe the investigation or charges:

In case of an emergency, please contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Please review the following school policy:

- As a volunteer, your responsibilities are to ensure the safety of the assigned students in my care and maintain a level of order and professionalism throughout the field trip or your assigned responsibilities.
- Other children or adults are not allowed to be brought on field trips or into the schools while volunteering. .
- Onsted Community Schools' and all Onsted Community Schools' activities shall be tobacco, drug, vape, and alcohol free.
- Your actions as well as clothing shall be in accordance with the student handbook. Appropriate dress for the activity is required; (no inappropriate slogans, imagery, or suggestive messages on articles of clothing or face coverings)
- Mobile phones should not be used while working with students.
- Photos of students are not permitted.
- In an emergency follow directions of OCS staff to ensure safety of yourself and others.

By signing below, I acknowledge that I have been provided with a copy of this volunteer form. By signing, I am also consenting to a criminal history background check anytime during the current school year (July 2025 - June 2026). I have read and understood the foregoing information and certify that it is true and correct to the best of my knowledge.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

*The Volunteer Coordinator will treat all applicants with the same respect, confidentiality, and security as an employment application and ensure this application is not available for viewing by other volunteers, parents, or staff unless authorized by administration. If a criminal history record is found, the coordinator will meet with administration to determine next steps.*