Lunenburg County Public Schools

Chaperone/Volunteer Application**



PLEASE CHECK ONE:
Chaperone
Volunteer

**Must be completed by new applicant or anyone who has not served as a volunteer/chaperone during the last five (5) school years.

After three (3) unsuccessful attempts to schedule an appointment for completion of requirements, application and payment will be returned to the school and applicant must reapply. Parent Name: (Please Print) Mailing Address ____State___Zip___ Home Telephone :_____ Cell #:_____ Email Address:____ Student's name/School/Grade_____ Applicant's Signature Please return form to your child's School *********** Disapproved Approved For School Use Only: Teacher's Signature Date Principal's Signature Date Please forward "approved" copies to Personnel Office, along with cash, a personal check or money order in the amount of \$22.00 which is 50% of the total cost for processing required paperwork. For School Board Office Use Only: Fingerprints _____ Date Social Services