

GENERAL ADMINISTRATION

Form 1425

School Community Relations

School Volunteers

Parent/Volunteer Form

Name: _____

Address: _____

Telephone No.: _____

Name of Volunteer's Student(s)

School Attending: _____

Grade Level: _____

Have you ever been convicted, or plead guilty to a felony or a misdemeanor related to sexual misconduct? Yes____ No____

If yes, please provide details:

Has a finding of probable cause of child abuse by any state agency been entered against you? Yes____ No____

If yes, please provide details:

I acknowledge the District will complete a general background check from the local law enforcement prior to beginning volunteer services.

Parent Signature

Falsification of this document is a misdemeanor.