



## Edenton-Chowan Schools Volunteer Application

Office Use Only

☐

Approved

☐

Not Approved

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

### PERSONAL DATA

Last Name:		First Name:		Middle Initial:
Street:			City:	
State:	Zip Code:	Home Phone (   )		
Cell Phone (   )		Email Address :		

Please specify the schools where you are planning to volunteer.

- ☐ White Oak Elementary School
- ☐ D. F. Walker Elementary School
- ☐ Chowan Middle School
- ☐ John A. Holmes High School

Special skills, languages, or hobbies: \_\_\_\_\_

\_\_\_\_\_

Please list what type of service you wish to provide to the school \_\_\_\_\_

\_\_\_\_\_

List any experience working with young people. (i.e. church, scouts, etc.) Include dates.

\_\_\_\_\_

When are you available to perform volunteer services: Days \_\_\_\_\_ Time \_\_\_\_\_

Are you willing to commit to: One school year of service \_\_\_\_\_ Other \_\_\_\_\_

To provide job shadowing \_\_\_\_\_ To be a guest speaker \_\_\_\_\_

## REFERENCES

List two references who have known you for at least one year:

Name (Non Related reference) \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Work phone \_\_\_\_\_

Name (Professional) \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home phone \_\_\_\_\_

Work phone \_\_\_\_\_

If you have done volunteer work with young people prior to this time, list as a reference your supervisor(s) from that organization, even if it occurred in another state:

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home phone \_\_\_\_\_

Work phone \_\_\_\_\_

## CODE OF CONDUCT

As an Edenton-Chowan Schools Volunteer, I agree to abide by the following code of volunteer conduct:

1. Upon arrival, I will sign in at the main office and agree to be punctual and reliable.
2. I will wear specified volunteer identification badge while on school grounds.
3. I will maintain confidentiality outside of school and will share with teachers and/or school administrators any concerns that I may have related to student welfare or safety.
4. I will not disclose, use or disseminate student photographs or personal information about students.
5. I agree not to exchange telephone numbers, home addresses, email addresses or any other home directory information with students without written parental and administrative approval unless required as part of my volunteer responsibilities.
6. I will not contact students outside of school hours without written permission from the student's parent or guardian.
7. I will follow teacher and staff instructions during fire and emergency drills, as well as lock down procedures for the purpose of school safety.

8. I agree to do what is in the best personal and educational interests of every child with whom I come into contact.
9. I agree to maintain professionalism and demonstrate respect for school policies.
10. I will dress appropriately while on school grounds.

**Please initials below to acknowledge that you have read all ten points in the code of conduct as listed above.**\_\_\_\_\_

I hereby certify that each and every statement made on this form is true and complete and understand that any misstatement or omission of information may disqualify me from consideration as a Volunteer or Mentor. By signing below I authorize Edenton-Chowan Schools and its authorized agent to conduct a criminal background check and I have the right to review the content.

Signature\_\_\_\_\_Date\_\_\_\_\_