

*\* Please Fill Out Both Sides \**

# Queen Anne's County Public Schools Volunteer Application Form



Please check one or both of the following statements:

- I plan to volunteer for one-day events as a Tier I\* volunteer**  
Examples: Field Trip Chaperone, Dance Chaperone, Career Day, Field Day, Book Fair, Science Fair Judge
- I plan to volunteer for overnight trips or on a regular, recurring basis as a Tier II\*\* volunteer**  
Examples: Overnight Band/Chorus Trips or Club/Team Trips, North Bay Trip, Classroom Asst., Coach, Advisor, Tutor, Mentor

### Personal Information

Date of application: \_\_\_\_\_ Email address: \_\_\_\_\_  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Physical Street Address (no PO Boxes): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Information on Your Child(ren) (This section is only required if your children attend elementary school)

Child's Full Name	School Name	Grade Level	Teacher's Last Name

### Acknowledgment of Volunteer Responsibilities

- I accept the following responsibilities as a volunteer for the Queen Anne's County Public School system:
- ⇒ I will complete any training that may be required by the individual school at which I plan to volunteer if requested by the Principal or Volunteer Coordinator.
  - ⇒ I will notify the school's volunteer coordinator or administrator as much in advance as possible if I must be absent from a scheduled commitment with the children.
  - ⇒ I will abide by all school rules and Board of Education policies which are applicable to me.
  - ⇒ I read, understand, and accept the policies written in the Volunteer Handbook.

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

\* Tier I: Any individual on the National Sex Offender Registry is not eligible for inclusion in the volunteer program with the Queen Anne's County Public Schools. The Registry will be checked annually for all Tier I volunteers.

\*\* Tier II: Fingerprinting is required every four years at the Board of Education of Queen Anne's County. The current cost is \$35.00. Any individual who pleads guilty or received a probation before judgment for any of the following crimes, attempted crimes, or criminal offenses is not eligible for inclusion in the volunteer program with the Queen Anne's County Public Schools: Crimes of violence, drug-related offenses, robbery, child abuse, pornography, contributing to the delinquency of a minor or similar crimes.

**PLEASE COMPLETE BOTH SIDES OF THIS FORM**

**Background Check Agreement**

It is the policy of the Board of Education of Queen Anne's County to require all volunteers to complete this Disclosure Statement. Subsequently, the Board of Education of Queen Anne's County will complete a criminal record check for conviction(s) and pending charges through the United States Department of Justice and FBI.

Date of Birth \_\_\_/\_\_\_/\_\_\_ Driver's License Number: \_\_\_\_\_ State issued in: \_\_\_\_\_

**Tier II applicants:** Were you fingerprinted by the Board of Ed. since September 1, 2015?  Yes  No

**Disclosure Questions:**

Have you ever been convicted of, received probation before judgment, received a not-criminally-responsible disposition or are you currently the subject of any pending criminal charges for felonies, misdemeanors and/or ordinance violations other than minor traffic violations?  Yes  No

Have you ever been convicted of, received probation before judgment, received a not-criminally-responsible disposition or are you currently the subject of any pending charges involving sexual molestation, physical or sexual abuse, or rape of a child?  Yes  No

If you have answered yes to either of the above questions, please provide more information below including the date, location and nature and circumstances of the offense:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I authorize the Board of Education of Queen Anne's County to review my personal background and conduct a full and complete criminal background check, if required. I understand that any misrepresentation on this statement may result in immediate disqualification for any volunteer service within the school district. I understand the Board of Education of Queen Anne's County will verify the information I have provided above. I hereby release the Board of Education of Queen Anne's County, its Board and its agents, as well as all providers of information, from any liability related to furnishing and receiving information related to arrests and convictions.

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

**Please return completed form in person to the school office. Bring your Driver's License and be prepared to have your photograph taken for entry in our Visitor ID System.**

**For School Use Only**

Name of school where application was received: \_\_\_\_\_

This applicant has my permission to be a  Tier I  Tier II volunteer in the school named above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Principal or Designee

**HR Use Only:**  Approved for Tier II Date Results Rcvd: \_\_\_\_\_ Approved by: \_\_\_\_\_