

Newton-Conover City Schools Volunteer Background Report Authorization and Release

1. I understand that it is my responsibility to notify NCCS within 10 days if there are any changes in response to any of the questions in the Volunteer Application.
2. By submitting this application for NCCS' consideration of me as a volunteer or continued assignment as a volunteer, I understand that NCCS may conduct inquiries into my character and background, including, but not limited to, a criminal background check and other pertinent information. I voluntarily authorize, without reservation, only to the extent necessary, NCCS to verify the foregoing information through any reasonable means, any person or entity contacted by NCCS to furnish the above stated information. I release any such person or entity as well as NCCS from any liability for conducting such background checks. I authorize NCCS to obtain one or more background checks immediately or in the future should they deem appropriate. I hereby consent to NCCS to obtain the above stated information.
3. I understand that a consumer report or an investigative consumer report (hereinafter referred to as "Report") may be procured at any time during my candidacy for employment and/or during my employment, contract work or volunteer work. I understand the Report may include information as to my character, work habits, performance, and experience, along with reasons for termination of past employment. I understand that as directed by Company policy, information may be obtained from public and private sources and may include information related to: social security number verification, criminal records, credit history, driver/motor vehicle records, employment, education, credentials and personal references. I also understand that the information I provide regarding my sex, race and date of birth will be used for the sole purpose of gathering the above mentioned information correctly, and will not be used to discriminate against me in violation of any law.
4. I understand that I can be accepted or denied as a volunteer with NCCS. I understand that it is the policy of NCCS to deny volunteer opportunities for individuals who have been convicted of any violent crime against any person who could be a threat to the safety of students and staff. If denied, I understand I have a right to make a written request, within a reasonable time, to receive information about the nature and scope of this background check and/or a review by the Volunteer Review Committee.
5. I understand that the Volunteer Review Committee will analyze any denied applications, as requested and that all decisions of the Volunteer Review Committee are final.
6. I am offering my services to NCCS without compensation and without any rights to health benefits in case of injury.
7. As a volunteer I assume the responsibility of confidentiality to be the same as an employee of Newton-Conover City Schools.
8. I affirm that my responses are true, complete and correct to the best of my knowledge and are made in good faith. Furthermore, I authorize any organization, person or agency to furnish information about me and I release any organization, person, agency and Company from any liability arising out of the request or release of the information contained in the Report. A photo or fax copy of this release form will be valid as an original thereof, even though said copy does not contain an original writing of my signature. Refusal to sign and return or by giving misinformation will result in disqualification from consideration.

Newton-Conover City School System does not discriminate against applicants or employees because of race, creed, religion, national origin, sex, age or any qualified individual with a disability

Signature _____ Date _____

*Please return this form along with your volunteer application to your **School Volunteer Coordinator**. Upon receipt, we will process your application and someone from the school will contact you. We are extremely grateful for your time and will do our very best to match your skills and services where they will be of greatest benefit. Thank you for your interest in our students' success.*

Newton-Conover City Schools Annual Volunteer Application

Indicate Which School(s) Volunteering: _____

Section 1: Volunteer Contact Information

Date _____ Student Name (if volunteering at your child's school) _____

First Name _____ MI/Maiden Name _____ Last Name _____

Race: _____ Date of Birth _____ / _____ / _____ Circle One: Male Female Social Security Number: _____

Home Address, City, St, Zip _____

E-mail Address _____ Home Phone _____

Employer _____ Business Phone _____

Business Address, City, St, Zip _____

Have you ever been employed by NCCS? Yes No If yes, give dates of employment: _____

Have you ever been convicted of a state or federal felony offense or entered a plea of guilty or no contest to a felony charge in a criminal proceeding? Yes No

Section 2: Volunteer Availability and Interests Please circle

How often are you available to volunteer?

Once a week Once a month
Every other week Periodically
List day of week available _____

What size group do you prefer?

Individual Classroom
Small group Large group

How long are you available to volunteer on each visit?

One hour Three hours
Two hours All day

What grade do you prefer?

Preschool Middle School
Elementary School High School

What time of day are you available?

7:00-9:00 AM Noon-3:00 PM
9:00 AM-Noon 3:00-6:00 PM
Lunch time only After 6:00 PM

Where would you prefer to volunteer?

At a school nearest your Home
Workplace

School(s) Requested: (Please list all schools where you volunteer and make a copy of this profile for each one.)

Task Assignment(s) Preferred: (Please list any preferences you have for your volunteer assignment.)

Special Skills, Interests, other information or Comments: _____

Next Steps for Volunteering

Newton-Conover City Schools has developed a volunteer screening process to ensure the safety of our children. This Volunteer Application is the first step in that process. Please sign and return the profile to your school. Please contact your school volunteer coordinator who will work with you to place you in an assignment that matches your interests and availability with school opportunities. Beginning with the 2010-2011 school year all level 3 volunteers are required to pay a \$7.00 application fee. This application and fee will be a one-time occurrence. The only time you will need to complete another form is if your child changes schools or your preferences change.

Volunteer Confidentiality & Signature (for all volunteers)

Volunteers will not be given access to student records without parent/guardian permission. If the volunteer should obtain any information pertaining to any student's official records, the volunteer agrees to keep any such information confidential and agrees not to disclose or permit to be disclosed, directly or indirectly, to any person or entity any such information, except as may be required in the performance of the volunteer's assignment.

My signature indicates that all information provided on this form is, to the best of my knowledge, true and accurate and that I understand and agree to comply with the Confidentiality Statement above.

Signed: _____ Date: _____

Newton-Conover City Schools Annual Volunteer Application

First Name _____ MI/Maiden Name _____ Last Name _____

Section 3: References

Please print. Complete the following information for **three non-family references**

1. Name _____ Relationship _____
Address _____
Street _____ City _____ State _____ Zip _____
Phone _____ How long have you known this person? _____

2. Name _____ Relationship _____
Address _____
Street _____ City _____ State _____ Zip _____
Phone _____ How long have you known this person? _____

3. Name _____ Relationship _____
Address _____
Street _____ City _____ State _____ Zip _____
Phone _____ How long have you known this person? _____

Section 4: Background Check Information and Consent *Please provide the following information*

Birth date (Required) _____
Month / Day / Year

Please indicate the places you have lived outside of Catawba County during the last five years. Use additional sheets if necessary.
County, State, Dates _____ County, State, Dates _____ County, State, Dates _____

I agree, if requested, to provide: Fingerprinting (*at convenient time/place arranged by school officials*) _____ (Initial Here)
I authorize the Newton-Conover City Schools to contact the references I have listed and perform a criminal background check at my expense. My signature also indicates that all information provided on this form is, to the best of my knowledge, true and accurate.
Signed: _____ **Date:** _____

Newton-Conover City Schools maintains certain records on volunteers. In accordance with Section 115C-209.1 of the North Carolina General Statutes, those records are not public records and shall not be open to inspection, except in accordance with that law.

Newton-Conover City School System does not discriminate against applicants or employees because of race, creed, religion, national origin, sex, age or any qualified individual with a disability.

For School Use Only

Please indicate the highest level task assignment for this volunteer. For any questions please refer to the NCCS Volunteer Screening Procedures or contact your Volunteer Coordinator.

Task Assignment(s) _____

Please check the highest level to be approved for: LEVEL 1 _____ LEVEL 2 _____ LEVEL 3 _____

Signature of School Volunteer Coordinator _____ Date _____