

**BOARD OF TRUSTEES
CHURCHILL COUNTY SCHOOL DISTRICT**

VOLUNTEERS

Volunteers shall complete a volunteer application and undergo a screening process to include a local background check and approval by the principal of the school.

Volunteers with Supervised Access:

Volunteers will submit their completed application and photo identification to the office of the school where they wish to volunteer. School office staff will ensure the applications are complete and make a copy of the volunteers' photo identification. School office staff will annotate completion of reference checks, ensure the principal has annotated approval on the applications, and send the completed applications to the District office for processing.

Volunteers with Unsupervised Access or chaperones on an overnight trip:

Volunteers must also deliver their fingerprints with their application and pay \$29.25 for the FBI Criminal Background check. This must be renewed every five (5) years.

Volunteer who works for an agency that requires the FBI Criminal Background check may provide evidence of that in lieu of providing fingerprints pursuant to NRS 391.104.

Volunteers shall comply with the following screening requirements:

- Submit to a state criminal records check upon initial application and every five years thereafter.
- Submit to and pay for a federal criminal records check if chaperoning an overnight trip or will have unsupervised contact with students.
- Be sponsored or approved by a school site or district employee.
- Complete and submit for approval the CCSD Volunteer Application Packet.
- Be able to present some form of current government-issued photo identification (driver's license, passport, military ID, US or other government identification).

ADOPTED: 4/24/79

REVIEWED: 10/11/07

REVISED: 3/1/01, 10/11/07, 5/22/08, 7/8/11, 7/12/17, 10/24/18, 12/12/18, 10/03/19

REVIEW RESPONSIBILITY: Director of Human Resources

VOLUNTEER APPLICATION
An Equal Opportunity Employer

Thank you for your interest in volunteering in Churchill County School District. In an effort to keep our children safe, we require all who wish to volunteer to complete a Volunteer Application. Return this completed application to the school office where you intend to volunteer.

Volunteers at schools where the principal has determined that they could have unsupervised access to students, or volunteers who attend an overnight trip must be fingerprinted under the Adam Walsh Act once every five years. Volunteers must provide two copies of their fingerprints and \$29.25 for the FBI criminal background check.

If you have a disability and believe you require accommodation for the disability during the selection process, please contact us to make appropriate arrangements.

Application Checklist

- Volunteering with Supervised Access
 - Volunteer Application (Fill out and submit to school)
 - Local Background Check Form (Fill out and submit to the school that one of your children currently attends)
 - Picture I.D. (Bring in with your application to be scanned by office staff)

 - Volunteering with possible Unsupervised Access or Volunteers who attend overnight trips
 - Volunteer Application (Fill out and submit to school with all required attachments)
 - Local Background Check Form (Fill out and submit to the school that one of your children currently attends)
 - Picture I.D. (Bring in with your application)
 - Fingerprint Request Form (Fill out, bring to Sheriff's Office or Police Department – cost is \$10.00 EXACT CASH ONLY – then attach to Volunteer Application) – Obtain two fingerprint cards
 - FBI Criminal Background (Fill out and attach to application)
 - Background check fee: \$29.25 check made out to the school or EXACT CASH (Submit to school with volunteer application)
-

Name: _____ **Date:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____ **Telephone:** (____) _____

Are you 18 years of age or older? Yes No

Volunteer Site Applied For: _____ **Department:** _____

I am a (check all the apply): Parent/Guardian of a District student Other Family Member/Caretaker
 Community Volunteer

If you are a parent/guardian, please list students and schools attending: _____

If you are volunteering as a community member, list the name(s) of the organization or business:

REFERENCES (please provide two (2) non-relative references)

(Name) (Relationship) (Phone) (Initial Reference Checked)

(Name) (Relationship) (Phone) (Initial Reference Checked)

OTHER INFORMATION

If you are not a current employee of **CCSD**, have you previously worked for **CCSD**?

Yes No When? _____

You must **ALWAYS** disclose criminal information **no matter how long** it has been since the offense/arrest. **Have you EVER been arrested (even if charges were dropped), or convicted, pled guilty or pled no contest to:**

- A criminal offense, other than a minor traffic violation, which includes, but is not limited to a felony, gross misdemeanor, misdemeanor, DUI, etc. Yes No
- A drug or sexual related offense or act of violence? Yes No
- A child abuse/sexual activity claim involving a student or minor or had charges filed against you by a school district, state / county agency, police or court? Yes No

If "Yes", please explain the type(s) of offense(s), Location(s) and date(s) in the space below. Attach a sheet if necessary.

Date	Charge/Offense	Disposition	Penalty	Explanation
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Note: Any applicant on an active "Wants and Warrants List", Registered Sex Offender, terrorist list or on Parole or Probation WILL NOT BE ALLOWED TO VOLUNTEER at Churchill County School District. The Churchill County School District reserves the right to deny any individual from serving as a volunteer.

VOLUNTEER COMMITMENT AND PROCEDURES

READ THE FOLLOWING CAREFULLY BEFORE SIGNING AND DATING THIS APPLICATION

Confidentiality: What you hear and observe about students, families, and staff while volunteering in a school is confidential. Repeating a seemingly harmless comment can lead to misunderstandings and hurt feelings. For schools to provide the best environment for learning, everyone's privacy must be respected.

Child neglect and abuse reporting: School volunteers are obligated under mandatory child reporting laws to report any suspected child neglect or abuse. Volunteers perform under the direction and supervision of school personnel. Volunteers should know and follow school policies and rules.

Student / Volunteer relationships: Volunteers function in a position of trust, and Churchill County School District does not extend that volunteer / student trust relationship outside of the supervised school environment. It is the responsibility of the volunteer to notify the site administrator immediately if he/she becomes involved with a student / family outside the CCSD environment in any capacity, such as scouts, other organizations, etc.

ACKNOWLEDGMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the boxes to indicate you have read and understand each of the statements.

- This is a volunteer application only. No statement by the District establishes a property right to perform volunteer work.
- The District, in its discretion and without a statement of reasons, may suspend any volunteer from further volunteer activities pending any background check.
- I authorize **CCSD** to contact any employer or individual that I have listed on my volunteer application and to obtain any relevant information regarding my previous employment, volunteer services, education, certificates, licenses, military service, criminal history, characteristics or traits, or other qualifications for volunteering with **CCSD**.
- In exchange for **CCSD's** consideration of my volunteer application, I authorize anyone possessing this information to furnish it to **CCSD** upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including **CCSD**, from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.
- I declare that I am offering to volunteer to provide services for civic, charitable, or humanitarian reasons and am doing so freely and without coercion, direct or implied, from **CCSD**. I recognize that I will not receive nor do I expect compensation for the services I am offering, other than possible nominal fees, paid expenses, or reasonable benefits which may be provided to me at the sole discretion of **CCSD** for performing the offered services. It is not my purpose nor my expectation that my services are in preparation for employment with **CCSD**.
- I understand and agree that **CCSD** will do a background check with law enforcement upon site approval as a volunteer.
- When I volunteer, I will check in at the front office to pick up a temporary identification badge to visibly wear during school hours.

The facts set forth in my volunteer application are true and complete. I understand that if asked to volunteer, any false statement on this application may result in my dismissal.

Signature of Applicant: _____ **Date:** _____

FOR SCHOOL USE: Date: _____ **Picture ID Check** _____ **(initial)**

Site Admin. Approval _____ **(initial)**

Volunteer - Supervised Access (pages 1-4 are required)

Volunteer - Unsupervised Access or overnight (page 1-5 are required)

FOR DISTRICT USE: Fingerprint/Background Check _____ **(date/initial)**

Administrator Only: I have reviewed the disclosed information above and accept do not accept this this applicant as a volunteer on our campus(es). If accepted, the background check and/or fingerprint check will be performed.

Principal Signature



CHURCHILL COUNTY SCHOOL DISTRICT

690 SOUTH MAINE STREET
FALLON, NEVADA 89406
PHONE: (775) 423-5184
FAX: (775) 423-2959
www.churchillcsd.com

Excellence in Education

HUMAN RESOURCES DEPARTMENT
KEVIN LORDS
DIRECTOR OF HUMAN RESOURCES

VIA FAX

Churchill County Sheriff's Office 423-3298

Fallon Police Department 423-6527

Date:

(PLACE PHOTO I. D. HERE)

The undersigned applicant of Churchill County School District gives his/her permission for the Churchill County Sheriff's Department and/or the Fallon Police Department to run a local background check for the purpose of volunteering in the school district.

This information will remain confidential and will be maintained in the applicant's file.

There will be no fee for this service.

Applicant Name (PRINTED)

Applicant (SIGNATURE)

Date of Birth

Please return fax to (775) 423-2959.

If any questions or concerns, please call the CCSD at 423-5184

Thank you.

SCHOOL(S) _____



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FINGERPRINT REQUEST FORM

Please provide this form to the fingerprint technician/official at the time the fingerprints are taken to ensure that all fields contain the required/authorized information needed for processing. Volunteers without a Fingerprint Request Form or with an incomplete Fingerprint Request Form may be denied fingerprinting until all applicable information is received.

Fingerprint technician/official, please ensure that you see photo ID for identity verification purposes prior to fingerprinting.

Volunteer Information:

Name (Last, First, MI):

Address:

City, State, and Zip:

Date of Birth: Place of Birth:

SSN (if required): Citizenship:

Sex: Race: Height: Weight: Eyes: Hair:

Authorized Entity Information:

Account Number (MNU): 880441 ORI: NVAWA001Z

Volunteer Responsible for Fees: Yes

Reason Fingerprinted (NRS or Public Law): Adam Walsh Act - Volunteer

Submit Fingerprints Electronic LiveScan: Yes No

If NO, please print hard cards and return to applicant for manual submission

Fingerprint Site Information:

Signature of Technician/Official taking prints: Date:

From the SO:

- Effective January 1, 2018, New fees will apply: County Residents \$10, Out of the County \$20
New hours: Tuesday: 6:30 am - 1:00 pm, Wednesday: 12:30 pm - 3:30 pm and Thursday: 9:00 am - 12:00 pm

Please return this form to the Churchill County School Site that you wish to volunteer with your volunteer paperwork.