

VOLUNTEER APPLICATION

Ms./Mrs./Mr. _____
Last First Middle

Birth Date _____

Child's Name _____ School _____
(if applicable)

Teacher's Name _____ Grade _____

Street _____

City _____ State _____ Zip _____

Phone (H) _____ Phone (W) _____

Cell _____ Email _____

I have read and understand the *Guide to Volunteering in Caroline County Public Schools* and understand the standards of behavior expected of volunteers and chaperones.

I, _____, hereby under the penalty of perjury declare and affirm that I have _____ have not _____ (please check one) been convicted of nor am I the subject of any pending criminal charges for the commission or attempt to commit any crime(s) as defined in the *Criminal Law Article, Code of Maryland*.

If yes, please explain (use additional paper if necessary): _____

I understand that I may be subject to a search of public information and records relating to my criminal history. I further understand that if a disqualifying offense is found in a check of public records or if I have given inaccurate or untruthful information, this will be the basis for refusal to allow volunteer or chaperone participation.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

School Administrator Signature _____ Date _____