

**PINELLAS COUNTY SCHOOLS
VOLUNTEER REGISTRATION FORM**

Please **PRINT** legibly and complete the entire form, front and back.
Please **ATTACH A COPY OF YOUR LEGAL/GOVERNMENT ISSUED PHOTO ID** will be kept on file.

LEGAL NAME as it appears on your photo ID		FIRST NAME	MIDDLE NAME	LAST NAME	MAIDEN/OTHER NAMES
DATE OF BIRTH		GENDER		SOCIAL SECURITY NUMBER	
MONTH	DAY	YEAR	Male <input type="checkbox"/>	Female <input type="checkbox"/>	

RACE - CHECK ALL THAT APPLY

White
 Black or African American
 American Indian or Alaska Native
 Asian
 Hispanic/Latino
 Native Hawaiian or Other Pacific Islander

LEGAL PHOTO ID REQUIRED

Driver's License (State) _____ DL/ID Number _____
 Identification Card (State) _____ DL/ID Expiration _____
 Military ID _____ Passport (Do not print **Military ID/Passport**) _____ Foreign ID (Country) & # _____

Home Address: _____ STREET _____ APT# _____ CITY _____ STATE _____ ZIP _____

Previous Address (if less than 5 years): _____ STREET _____ APT# _____ CITY _____ STATE _____ ZIP _____

Home phone: _____ Work Phone: _____ Cell Phone: _____

E-mail Address: _____ parent account ID: _____

Employment or Organization represented: _____

Are you a current or former employee in Pinellas County Schools? No Yes Occupation: _____

School at which you want to volunteer: _____

Are you currently a student in a Pinellas County School? No Yes Where? _____

Emergency Contact: _____ Phone: _____

Days & Times Available to Volunteer: _____

Do you have a child/children attending this School? No Yes

CHILD'S FULL NAME	TEACHER	GRADE	CHILD'S FULL NAME	TEACHER	GRADE
CHILD'S FULL NAME	TEACHER	GRADE	CHILD'S FULL NAME	TEACHER	GRADE

Check which school level(s) you're interested in:

Elementary Middle High
 Mentor Tutor What subj: _____
 Lunch Pals Classroom Speaker Media Center
 Take Stock in Children Clerical/Office Field Trip/Overnight Field Trip - Driver Chaperone
 5000 Role Models PTA/SAC Boosters Other _____
 Girlfriends List Club: _____
 Peer to Peer

Pursuant to School Board Policy 9180, volunteers who have unsupervised contact with students must be Level II screened.
All non-school board employees who are scheduled to attend overnight fieldtrips as chaperones/drivers must be Level II screened.

YOU MUST COMPLETE AND SIGN THIS REGISTRATION FORM BEFORE WE CAN PROCESS IT.

Have you ever been charged, arrested or convicted of a felony or misdemeanor? This includes a criminal traffic citation such as a DUI, driving with a suspended license or reckless driving. Note that under School Board Policy, a "conviction" means a conviction by a jury or a court and includes a plea of nolo contendere, the imposition of a deferred or suspended sentence by the court, adjudication withheld, or entry into a pre-trial intervention, pre-trial diversion, or similar program. You must list these matters below no matter how long ago they occurred. Also, include any sealed or expunged convictions.

No Yes

If you check **NO**, and offenses appear on the criminal background screening, you will not be able to volunteer. If you check **YES**, please list all offenses, the disposition (example: no information found, pled guilty, paid fine, plead no contest, PTI/PTD etc.), the date and location of the offense(s).

List ALL Offenses	Disposition	Date of Offense(s)	Location (State & County)

Pineellas County Schools reserves the right to refuse volunteer assignments to any individual whether or not he or she has been convicted of any offense. In completing this public document, please understand Pineellas County School's sincere concern for the safety of its students, staff and visitors.

By signing below, I agree to the rules and regulations of the volunteer program and that any product produced while a volunteer shall be the property of the School Board (a work for hire). I understand that all involvement with students shall be under staff supervision and is restricted to the school day, on the school grounds, or a school-sponsored activity. I also understand volunteers are not employees or personnel of the school board. My signature below certifies that I have reviewed the criminal offense statement and responded truthfully. FALSIFICATION OR OMISSION OF THIS OFFICIAL PUBLIC DOCUMENT IS A CRIMINAL OFFENSE, CAN BE PROSECUTED, AND WILL CONSTITUTE GROUNDS FOR VOLUNTEER DISQUALIFICATION.

I agree to maintain the **CONFIDENTIALITY** of student's information.

X

VOLUNTEER SIGNATURE _____

DATE _____

The Pineellas County School Board is a public agency and subject to the Florida Public Records Act. All records, with certain limited exceptions, are subject to public viewing.

VOLUNTEER ELIGIBILITY Policy

The District Office will review all offenses to determine the outcome of your volunteer status and reserve the right to determine your eligibility status.

• **MAY NOT VOLUNTEER IF CONVICTED OF** any felony sexual related crimes, (including lewd and lascivious crimes) and felony child abuse.

• **MAY NOT VOLUNTEER IF CONVICTION WAS WITHIN THE LAST TEN (10) YEARS** for other felony crimes and any misdemeanor crimes of a sexual nature, (including indecent exposure) and misdemeanor crimes related to children.

• **MAY NOT VOLUNTEER IF CONVICTION WAS WITHIN THE LAST FIVE (5) YEARS** for felony the/economic crimes, misdemeanor or crimes of violence (including violation of injunction or protection against domestic violence), misdemeanor drug crimes, and misdemeanor crimes involving weapons.

• **LIMITED VOLUNTEER:** May volunteer, but **MAY NOT HANDLE MONEY** if crimes involving worthless checks/petty/retail theft committed within the last five (5) years. May volunteer, but **MAY NOT DRIVE** if students for DUI conviction within the past five (5) years. **MAY NOT DRIVE** students for two DUI convictions within the last ten (10) years. **MAY NEVER DRIVE** students if volunteer has three or more DUI convictions.

• **CASE BY CASE REVIEW:** Other misdemeanors – Multiple convictions – Pending charges – Other Restrictions

APPEAL PROCESS FOR INELIGIBLE VOLUNTEERS – POLICY 9180

Applicants appealing their ineligible status must provide an appeal letter that includes the circumstances surrounding any/or all criminal offense(s) for which the exemption is sought. The appeal letter and all supporting materials, e.g. police report, and letters of recommendations, are to be sent to the Office of Strategic Partnerships District Volunteer Coordinator. For all questions please call 727-588-5050.

NOTE OF THE COLLECTION AND USE OF SOCIAL SECURITY NUMBER

Notice is hereby given that Pineellas County Schools collects social security numbers from individuals for the following purposes, which are either specifically, authorized by law or are imperative for the performance of the district's duties and responsibilities as prescribed by law: Employment eligibility, Criminal Background Screening, Certification/Contributions Tracking of students as required by State Board Rule, Tracking and reporting of Corporate Tax Credit Scholarship students as required by State Board rule, Student identification numbers State directory of new hires, Annual report of wages and individuals, Record of remuneration paid to employees and Unemployment benefits.

The School Board of Pineellas County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, sexual orientation or disability in any of its programs, services or activities.

www.pcsb.org