

Greenup County Schools Volunteer Application Form

Office Use Only
_____ Bkgr. Check Year
_____ Approved

Last Name	First Name	Middle Initial
Social Security Number	Date of Birth	
Address _____		City _____ State _____ Zip _____
E-Mail _____		Volunteer School (s) _____
Name of child/grandchild attending school, if applicable _____		

CONDITIONS OF COMMITMENT - As a volunteer, I agree to:

- Abide by the volunteer handbook (online at www.greenup.kyschools.us)
- Submit to a criminal records check
- Never discipline students
- Dress in an appropriate manner for my volunteer assignment
- Treat teachers, staff, students and other volunteers with respect
- Become familiar with safety and evacuation plans of the school
- Read and sign the Acceptable Use Policy before using school computers
- Keep the confidentiality of teachers, staff and students
- Discuss concerns with the principal or teacher
- Abide by all school rules and Board of Education regulations and policies that apply to me
- Honor my commitment to work as scheduled
- Notify the superintendent/designee if convicted of a crime after the initial background check

The Greenup County Board of Education reserves the right to deny a volunteer based upon knowledge of any offense that demonstrates a risk to students. NO CONSIDERATION will be given to any volunteer applicant who has a conviction for the following offenses:

- Any felony conviction
- Any drug conviction within the past five (5) years; or more than one (1) drug conviction, one of which has been in the past 10 years.
- Any weapons violation
- Any sex related crime
- Harassment
- Assault; criminal abuse
- Any pending criminal charges
- Other law violations the Superintendent deems to cause a risk to students

CONFIDENTIALITY

As a participating member of the Greenup County School District Volunteer Program, I fully understand that oral and written information involving children, families, and school staff is strictly confidential. I also understand that information may not be released without the express written consent of the parent/guardian or individual(s) involved.

I understand that by violating confidentiality policy, I am personally liable and my rights and privileges as a volunteer will be terminated.

I have read the volunteer handbook and agree to the conditions as outlined. I understand that by submitting this form, I am giving Greenup County Schools permission to run a criminal background check on me.

Volunteer Signature _____ Date _____