



Attica Consolidated School Corporation

Volunteer Information Form

Name _____ Date _____

Address _____

Telephone _____ Date of Birth _____

Students in school & Grade Level _____

Emergency Contact _____ Relationship _____

High School Attended _____

Other Education or Training _____

List job related experiences, skills, qualifications or interests that will be of special benefit to the students and / or the schools:

Personal References:

What will you be volunteering for, athletic team, classroom, etc., please be specific:

OTHER QUESTIONS

1. Have you ever been convicted of a violation of law other than a minor traffic violation? (The term "conviction" includes any conviction, a guilty plea, a plea of no contest, a suspended sentence, a deferred sentence, a deferred judgment, or a finding of guilt by a jury or judge.)
2. Have you ever been investigated for, charged with, or pleaded guilty or "no contest" to any crime involving the sexual abuse of any person or indecency with a minor?
3. Have you ever been terminated or discharged, or resigned at the request of your employer from any job related to PK - 12 education?
4. In connection with your professional responsibilities, have you ever been the subject of a complaint or been disciplined by a court or a licensing board of any state?
5. Are you currently under investigation, by any regulatory body, for any alleged misconduct or other alleged grounds for discipline?
6. Have you ever had a license (teachers / drivers) revoked in this state or any other?

If you answered "yes" to any of the above questions, please explain on a separate paper including the date of the incident, charge, any court action taken, the offense in question, and the address of any court involved.

AUTHORIZATION AND RELEASE

Please read carefully and then sign your name if you agree to the terms of this understanding. I hereby certify that the statements made by me in this application and all related information which I have provided are true, accurate, and complete to the best of my knowledge. I understand that if I provide any false, inaccurate, or incomplete information, I will not be eligible to volunteer within the Athletic Department, Schools or Corporation.

Signature

Date

In addition to the application, you must complete a volunteer background check thru SafeHiring Solutions that is provided on our website, www.attica.k12.in.us under the employment link.

Applications should be returned to the supervisor of the area in which you wish to volunteer.

Attica Consolidated School Corporation is an equal opportunity provider.

ADDRESS

205 E Sycamore St
Attica, IN 47918

PHONE: 765 762-7000
FAX: 765 762-7007

WEBSITE

www.attica.k12.in.us