

PINELLAS COUNTY SCHOOLS
VOLUNTEER REGISTRATION FORM

All school volunteers must complete this registration form to volunteer in PINELLAS COUNTY SCHOOLS. Please **PRINT** legibly and complete the entire form, both front and back. For your safety, and that of our students, a **BACKGROUND CHECK** will be completed on all volunteers. A complete registration form with an original signature and a copy of your legal/government issued photo ID, must be kept on file. **PLEASE ATTACH A COPY OF YOUR LEGAL/GOVERNMENT ISSUED PHOTO ID.**

| | |
|---|--|
| LEGAL NAME as it appears on your photo ID | <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> _____ _____ _____ _____ </div> <div style="display: flex; justify-content: space-between; font-size: small;"> LAST NAME FIRST NAME MIDDLE NAME ANY OTHER NAMES EVER USED </div> |
|---|--|

| SOCIAL SECURITY NUMBER | | | | GENDER | | | | DATE OF BIRTH | | | | | |
|------------------------|--|--|--|-------------------------------|---------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| | | | | <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | | | | | | MONTH MONTH | | DAY DAY | | YEAR YEAR | | | |

| RACE | | | |
|--------------------------------|--------------------------------------|--|--------------------------------|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Native American | <input type="checkbox"/> White |
| <input type="checkbox"/> Black | <input type="checkbox"/> Multiracial | <input type="checkbox"/> Other: _____ | |

Home Address: _____

STREET
APT#
CITY
STATE
ZIP

Previous Address (if less than 5 years) _____

STREET
APT#
CITY
STATE
ZIP

Home phone: _____ Work Phone: _____

E-mail Address: _____ Alternate Phone: _____

Business/Organization: _____

School where you will be volunteering: _____

Other schools where I have volunteered (& when): _____

Have you ever attended our mentor training class? No Yes When? _____

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

Are you currently an employee in Pinellas County Schools? No Yes Where? _____

Emergency Contact: _____ Phone: _____

Days & Times Available to Volunteer: _____

| |
|---|
| Do you have a child/children attending this School? <input type="checkbox"/> No <input type="checkbox"/> 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 |

| |
|---|
| I am interested in the following placements: |
|---|

| | | | |
|---|---|---|--|
| <input type="checkbox"/> Mentor | <input type="checkbox"/> Chaperone (<input type="checkbox"/> Day trip <input type="checkbox"/> Overnight) | <input type="checkbox"/> PTA/SAC | <input type="checkbox"/> Clerical/Office |
| <input type="checkbox"/> Tutor _____ subject | <input type="checkbox"/> Field Trip Driver (proof of insurance & DL required) | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Booster: _____ |
| <input type="checkbox"/> Classroom Assistant | <input type="checkbox"/> Media Center/Exceptional Education | <input type="checkbox"/> Special Events | <input type="checkbox"/> Other: _____ |

| |
|---|
| Career/Volunteer Experience/Talents/Languages/Skills/Hobbies |
|---|

Please answer All Questions on reverse side

VOLUNTEER ELIGIBILITY GUIDELINES

MAY NOT VOLUNTEER IF CONVICTED OF:

Felony sexual related crimes, lewd and lascivious crimes, and felony child abuse crimes.

MAY NOT VOLUNTEER IF CONVICTION WAS WITHIN THE LAST 25 YEARS. WILL CONSIDER AND CAREFULLY REVIEW IF CONVICTION WAS BEYOND 25 YEARS:

Felony crimes of violence and felony sale of controlled substances.

MAY NOT VOLUNTEER IF CONVICTION WAS WITHIN THE LAST 10 YEARS. WILL CONSIDER AND CAREFULLY REVIEW IF CONVICTION WAS BEYOND 10 YEARS:

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 5 YEARS. WILL CONSIDER AND CAREFULLY REVIEW IF CONVICTION WAS BEYOND 5 YEARS:

Felony theft/economic crimes, misdemeanor crimes of violence, misdemeanor drug crimes, misdemeanor crimes involving weapons. Worthless Checks – will be considered on a case by case basis.

OTHER RESTRICTIONS:

May not drive students for DUI conviction within the past five years, or ten years if volunteer has two DUI convictions. May never drive students if volunteer has three or more DUI convictions.

CASE BY CASE REVIEW:

- Other misdemeanors
- Multiple convictions
- Pending charges

For the purposes of these volunteer guidelines, criminal convictions mean a conviction by a jury or by a Court and shall also include the forfeiture of any bail, bond or other security deposited to secure appearance by a person charged with having committed a felony or misdemeanor, the payment of a fine, a plea of nolo contendere, the imposition of a deferred or suspended sentence by the Court, adjudication withheld, a finding of guilt in or out of court, a plea of no contest or the date of entry into a pre-trial intervention, pre-trial diversion, or similar program, so long as such PTI/PTD program is completed by the end of the relevant waiting period. Conviction does not include crimes for which the defendants have received an executive pardon or crimes the juvenile records of which has been sealed or expunged.

PLEASE COMPLETE AND SIGN BELOW

Do you agree to maintain **CONFIDENTIALITY** of student's information? No Yes

Pinellas County Schools has a responsibility to its students, staff and visitors. In this regard, all individuals desiring volunteer assignments on our campuses (our facilities) are required to complete a criminal history document. Pinellas County Schools reserves the right to refuse volunteer assignments to individuals convicted of offenses pursuant to FSS 112.011. In the space provided please list all charges of a criminal offense, whether adjudicated guilty or not, and whether the offense occurred in Florida or in another state. Include all convictions of criminal traffic offenses such as DUI, driving with a suspended license and careless or reckless driving. Also include any sealed or expunged convictions and any convictions or confirmations of child abuse. In completing this public document, please understand Pinellas County School's sincere concern for the safety of students, staff and visitors.

Have you ever been CONVICTED, as defined above, pled no contest, or had adjudication withheld in a criminal offense, No
felony or misdemeanor OR are there any criminal charges now **pending** against you other than minor traffic violations? Yes

If Yes, please show date of convictions, the town, city, state where it occurred, the arresting agency, the specific offense and the disposition of the case (paid fine, guilty, nolo contendere, adjudication, PTI/PTD, etc.)

| DATE OF CONVICTION | LOCATION/ARRESTING AGENCY | SPECIFIC OFFENSE | DISPOSITION |
|--------------------|---------------------------|------------------|-------------|
| | | | |
| | | | |

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. My signature below certifies that I have reviewed the criminal offense statement and responded truthfully. **FALSIFICATION OR OMISSION ON AN OFFICIAL PUBLIC DOCUMENT IS A CRIMINAL OFFENSE AND CAN BE PROSECUTED, AND MAY CONSTITUTE GROUNDS FOR DISQUALIFICATION FROM BEING A VOLUNTEER.**

X _____
VOLUNTEER SIGNATURE DATE

FOR SCHOOL USE ONLY

School Name: _____ For this school/site: New Volunteer Returning Volunteer

Copy of legal/government issued photo ID attached Legal name/birthdate verified Entered into Volunteers Count!

FDLE/Raptor check completed _____ If criminal offenses listed, sent to District Office on: _____
DATE & INITIAL DATE

Volunteer interviewed/placed by: _____ Type/location of placement: _____