

School Level Coordinator		
Requesting	Level 1 □ Level 2 □	
Initials:	_	

VOLUNTEER APPLICATION FORM						
Name:	Last Nama	MI	Date of Birth:			
	Last Name First Name	IVII				
Address:	Address	City	State Zip	Code		
Phone Nur	mber: Email Add	•				
Emergency	y Contact - Name and Phone Number:					
School:		Supervising Teacher/Principal				
	ve a personal connection to a student(s) at this location (i.e. Johnny Smith, 4th grade, mother).			e of the student, grade, and		
☐ Assi: ☐ Roo ☐ Cha ☐ Extr	st in library/office/clerical work m parent (supervised) perone field or other school sponsored trip(s) a or co-curricular activities (List:	Read Volu	ding aide nteer athletic coach/assistant			
☐ Othe		-)		
behavior disposition I acknowle rejection Volunteer	ever had findings made against you in any legal pro (sexual or otherwise) involving a minor child? n(s) edge that any falsification, omission, deliberate misr as a volunteer. I have read and agree to the requ Agreement. I understand that the Lafayette Parish S ninatory reason and that my volunteer services are te	Yes C epreser iremen	No If Yes, please provide offense(sometation or failure to complete any part ts for volunteers as stated in the Lafaystem reserves the right to reject any a	of this form is grounds for ayette Parish School Board applicant for any legitimate,		
I hereby co criminal be this distric	onsent and authorize the Lafayette Parish School Sys ackground check(s) of me that it, in its sole discretic ct. I understand such inquiry may include computer c and checks conducted through the Louisiana Bureau of	tem to on, deer databas	inquire into and undertake sex offende ms appropriate to determine my fitnes e searches and criminal history checks,	r registry search(es) and/or s to serve as a volunteer in including fingerprint-based		
Signature:			_Date:			
		FFICE USE				
For <u>Le</u>	<u>evel 1</u> Volunteers Only		For <u>Level 2</u> Volunteers Only			
□Sex	offender registry searches completed		□Background check on file in HR	Division		
□Cop	by of Photo ID attached		□Copy of Photo ID attached			
□Log	ged		□Logged			
□Ар	proved □ Denied		□ Approved □ Denied			
HR Dep	partment Representative Signature		HR Department Representative Signature			
Printed	Name Date		Printed Name	Date		



LAFAYETTE PARISH SCHOOL BOARD VOLUNTEER AGREEMENT

I have agreed to serve as an unpaid volunteer for the Lafayette Parish School Board (hereinafter "Board"). As a volunteer, I agree to abide by all local, state, and federal laws and regulations and all policies, regulations, and procedures of the Board and its schools, including, but not limited to, the following:

- 1. I agree to undergo a criminal background check, if requested, before being allowed to begin and/or continue volunteer services;
- 2. I understand that volunteer service is a privilege that may be granted, denied or revoked at any time in the school district's sole discretion;
- 3. I understand that volunteers shall not be entitled to any payment, salary, compensation or consideration of any kind from the Lafayette Parish School System;
- 4. I understand and agree that, as a district volunteer, I will be subject to the direction and supervision of the Supervising Teacher and/or Principal of the school, and/or their designee(s);
- 5. I agree to wear my identification badge at all times while volunteering in any school-related program;
- 6. I agree to comply with standards of professional conduct including, but not limited to, displaying appropriate behavior, language and attire at all times while volunteering in any school-related program;
- 7. I will treat all students and employees with respect;
- 8. I will not emotionally or physically abuse any child or student;
- 9. I will not commit any criminal act involving a student;
- 10. I will not use tobacco or tobacco products, alcohol or illegal drugs or be under the influence of alcohol or any illegal drug while volunteering in any school-related program; and
- 11. If I am approved as a Level 2 volunteer, I will report to the district's Human Resources Department in the event I am convicted of or charged with any felony or abuse-related offence(s) prior to continuing volunteer service in the district.

I agree to familiarize myself with Board policies which are provided for my convenience on the Board's website at http://caps.lpssonline.com/.

Any violation or failure to abide with the terms of this Agreement may result in the immediate termination of my privilege to serve as a volunteer. Additionally, the Board, its agents, or the Superintendent may reject or terminate my status as a volunteer at any time for any reason.

The Board also reserves the right to update or modify this Agreement at any time, and I agree to sign and comply with such Agreement, as amended.

By signing this document, I agree that I have read and understand the terms of this Agreement and that I consent to all terms and conditions contained in the Agreement.

Signature	Date
Printed Name	