

Arlington Independent School District
VOLUNTEER APPLICATION

• Print (Legibly) or Type All of the Following Information.

• Please Complete ONE Application Only.

List all of your school age children and all of the schools where you will be volunteering:

Student's Name _____ Grade _____ School _____

Student's Name _____ Grade _____ School _____

Student's Name _____ Grade _____ School _____

Which teacher, sponsor or booster club will you be working with? _____

All information on the front and back of the application must be provided.

Volunteers will be placed on the school's list of approved volunteers when a clear criminal history has been received from the Texas Department of Public Safety. This process may take four to six weeks.

VOLUNTEER'S NAME: _____
Last *First*

MAILING ADDRESS: _____
Street _____ **HOME PHONE:** _____
City _____ *Zip* _____

ARE YOU AN AISD EMPLOYEE? Yes No **LOCATION:** _____

Employer: _____ Work Phone: _____

Have you ever served as a school volunteer? Yes No

If so, where and in what capacity: _____

PERSONAL REFERENCE REQUIRED:

Name *Telephone*

Address *City* *Zip*

CODE OF ETHICS FOR VOLUNTEERS

- I realize that being a volunteer for Arlington ISD can help a student to attain his/her maximum educational potential as well as help and encourage all aspects of student growth.
- I will be responsible for arriving on time and be regular and consistent in attendance.
- I will encourage positive attitudes through sincere praise.
- I will be sensitive to procedures and student needs.
- I will be flexible in working with new ideas and materials.
- I agree to keep student information confidential. I will have respect for the confidential nature of school records, assignments, and relationships between staff members and students.

**TEXAS DEPARTMENT OF PUBLIC SAFETY
CRIMINAL HISTORY RECORD INFORMATION AUTHORIZATION**

In accordance with Arlington ISD Board Policy DC (Legal), this application is being used to help provide a safe and secure environment for Arlington ISD students. The requested information regarding sex, race, and date of birth is required by the Texas Department of Public Safety. This information is kept strictly confidential and is necessary only for processing the criminal history. This information will only be released as required by law.

• Please Print (Legibly) or Type All of the Following Information •

VOLUNTEER'S NAME: _____
Last *First* *Middle* *Maiden*

SEX: Male Female

RACE: American Indian Asian Black Hispanic White

DATE OF BIRTH: _____ **PLACE OF BIRTH:** _____
Numeric Month/Day/Year *City/County/State*

SOCIAL SECURITY #: _____

DRIVER'S LICENSE #: _____ **STATE:** _____

COUNTIES/STATES RESIDED IN: _____

Have you ever been convicted of or received deferred adjudication for a crime other than a minor "traffic offense?" Yes No

If the Texas Department of Public Safety returns an apparent criminal history for anything other than a minor "traffic offense," you will not be placed on the school's list of approved volunteers until you are able to provide official proof that the record is clear, or until an appeal is successfully processed. Appeal process information will be mailed to those not approved.

**IN ORDER TO PROTECT THE STUDENTS OF ARLINGTON ISD,
WE ASK OUR VOLUNTEERS TO READ AND SIGN THE FOLLOWING:**

I, the undersigned, authorize AISD to obtain copies of any information, pertaining to any criminal history record maintained by any law enforcement agency, and to use said information for the purpose of evaluating my application for volunteering. I hereby authorize AISD to request any relevant information from my employer(s) and I authorize any references to release such information.

I have also read and understand the **Code of Ethics for Volunteers** and affirm that all the information contained in this application is true and complete and that misrepresentation, falsification or omission shall be cause for relinquishing my role as a volunteer in the Arlington ISD.

VOLUNTEER'S SIGNATURE _____ ***DATE*** _____

➔ This form may be returned to: Susan Caldwell, AISD Volunteer Program Coordinator
1202 West Arkansas Lane
Arlington, Texas 76013
Office: 817/459-7826 Fax: 817/459-7843

For Office Use Only:

School: _____ Date Received: _____ CHR Processed: _____
Volunteer Application: Complete Incomplete