



**School District 27J**  
 18551 E 160<sup>th</sup> Avenue  
 Brighton, CO 80601-3295  
 (303) 655-2919 FAX (303) 655-2966

**Office for Human Resources**  
 Christina Feighner  
 Volunteer Program Coordinator  
 cfeighner@sd27j.org

## VOLUNTEER APPLICATION

**SCHOOL or SITE:** (where you intend to volunteer) \_\_\_\_\_

**1. VOLUNTEER APPLICANT'S PERSONAL INFORMATION (Please Print Clearly)**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Birth date: \_\_\_\_\_ Maiden or Any Other Names Used: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip Code: \_\_\_\_\_

List all other cities where you have lived since becoming an adult (age 18):

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Child(ren)'s Name(s) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**2. PLACEMENT REQUEST**

\_\_\_\_\_ Classroom. Teacher's Name: \_\_\_\_\_

\_\_\_\_\_ Volunteer Coach (MS or HS) Sport: \_\_\_\_\_ Coach's Name: \_\_\_\_\_

\_\_\_\_\_ Field Trip Student Chaperone. Date and destination: \_\_\_\_\_

\_\_\_\_\_ Before/After School Program. Name of Program: \_\_\_\_\_

\_\_\_\_\_ Overnight Chaperone and/or Driver. Date and Destination: \_\_\_\_\_

\_\_\_\_\_ Clerical/Front Office/Library. Describe: \_\_\_\_\_

\_\_\_\_\_ Other. Describe: \_\_\_\_\_

**Note: You will not be approved as a 27J Volunteer if you do not answer the questions on this form truthfully, and you will not be allowed to reapply as a volunteer at any 27J site during the current school year. The district has a background check performed on all volunteer applicants. Not all offenses will disqualify you from service as a volunteer, but you must fully disclose felonies and misdemeanors.**

**Have you ever been charged with, arrested for, convicted of, pled nolo contendere to, or received a deferred sentence or deferred prosecution as an adult for a felony or a misdemeanor crime? \_\_\_No \_\_\_Yes**

If yes, please describe: *(Attach additional paper if necessary)*:

\_\_\_\_\_

3. ACKNOWLEDGEMENTS

Please carefully read each item governing the terms and conditions of volunteer service in School District 27J. After you have read the agreement, please complete the required information and sign. If you have any questions, please contact me at the information provided above.

- A. I understand and agree that if I am approved as a School District 27J volunteer, I will be subject to the direction and control of the Principal of the school, Site Supervisor/Director, or their designees.
- B. I understand that prior to serving as a volunteer in School District 27J the school district will conduct a background check on me, and may update it at any time during my service as a volunteer. This background check will include obtaining a report that will include information concerning any criminal history. By providing the information requested and signing below, I consent to School District 27J conducting a background check.
- C. I understand that School District 27J reserves the right and discretion to deny my application and may suspend, restrict, and/or terminate my status and service as a volunteer at any time for any reason.
- D. I agree to watch the 27J Volunteer Safety and Security Training presentation and direct any questions to school staff or the 27J Volunteer Coordinator.
- E. At all times, I will serve under the direct supervision of a school district staff member.
- F. I will wear my 27J Volunteer identification badge at all times when I am providing volunteer services for School District 27J, and will follow site check-in and check-out procedures.
- G. For every child I interact with or observe as a volunteer, I understand that I am obligated to report any known or suspected child abuse to the teacher, Principal, counselor, or Site Supervisor/Director.
- H. I understand that I am NOT to contact parents, legal guardians or student emergency contacts unless directed to do so by the Principal, Site Supervisor/Director or their designees.
- I. I will conduct myself in a friendly, courteous manner and not show partiality toward any student, and will remain neutral in my speech and actions with respect to religion and politics at all times while engaged in volunteer services with students.
- J. I understand that I am to call the school directly if for any reason I cannot fulfill my volunteer expectations.
- K. I understand that it is my responsibility to inform the Principal or Site Supervisor/Director of any health/medical issues that may impair my ability to or prevent me from properly carrying out the duties and responsibilities of the volunteer service to which I have been assigned.
- L. I understand it is my responsibility to immediately report any injuries I incur while volunteering for School District 27J to the Principal or Site Supervisor/Director.
- M. I understand and agree that as a School District 27J volunteer I am subject to all applicable School District 27J policies/regulations and to all directives from authorized School District 27J officials.
- N. I understand that while performing my volunteer service, I am not considered an employee and am therefore not compensated or afforded insurance coverage under any district’s insurance policies (ex: workers’ compensation, general liability, errors and omissions, etc.). Also, in case of physical injury to me, or damage or theft of personal property, (including my personal vehicle), I understand that I am not entitled to any liability coverage provided by the district.
- O. I understand that failing to maintain the confidentiality of all student education records and information may disqualify me from further service as a volunteer. I will not disclose, use or disseminate student photographs or personal information about students.
- P. **Volunteer Coaches Only:**
  - a. I understand that at all times my volunteer service will be under the direct supervision of the Head Coach and that the principal or designee will determine the responsibilities of my volunteer position.
  - b. I will be familiar with and abide by all District and CHSAA rules governing athletics and activities.

I affirm I have read and understand all the information above, that all information I have provided is true and accurate, and that I agree to abide by all sections and conditions above.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Return this application to the school where you are applying to volunteer.

**\*\* Copy of Driver’s License or ID is Mandatory \*\***

**27J School Volunteer Authorization:**

\_\_\_\_\_  
Principal/Administrator (or Designee) Authorizing Volunteer Date: \_\_\_\_\_

\_\_\_\_\_  
School District 27J HR Volunteer Coordinator Date: \_\_\_\_\_