2024-2025 APS Volunteer Form

The Board of Education recognizes and appreciates the generosity and support it receives from volunteers.

Volunteer Information-Please use a pen.				
Name:		("Volunteer")		
Address:				
Phone Number: Date of Birth: _				
Email:				
Male Female (Please circle one) Race: White, Black, Asian/Pa	acific Islar	nder		
American Indian/Alask	an Native			
Have you previously volunteered for the District?	☐ Yes	□ No		
Have you previously been denied the opportunity to volunteer for the District?	☐ Yes	□ No		
Are you a registered sex offender?	☐ Yes	□ No		
Have you been convicted of a felony?	☐ Yes	□ No		
If yes, please describe the offense(s), date(s), and location(s):				
Are you the subject of a current criminal or child protective	☐ Yes	□ No		
services investigation, or do you have pending criminal charges against you?				
If yes, please describe the investigation or charges:				
Requested Volunteer Position				
Event/Location:				
Start Date: End Date:				
School Contact:				
Building				
Name of children attending the district:				

Terms & Conditions

Volunteer agrees to indemnify, defend, and hold harmless the District, its officers, employees, agents, board members, students, and guests from all claims, damages, and liabilities, including attorneys' fees, in any manner arising from Volunteer's volunteer services. Volunteer is responsible for all injuries or damages to persons or property caused by Volunteer.

If the District approves this request, the Volunteer certifies that when serving in the volunteer position, they will (i) perform as a volunteer and not as a District employee; (ii) comply with all federal, state, and local laws, rules, and regulations; (iii) comply with any additional requirements or conditions that may be imposed by the Superintendent; and (iv) not use or be under the influence of illegal drugs or alcohol;(v) and must report any behavior that is not appropriate for school.

Volunteer acknowledges that volunteering for the District is a privilege, not a right. The Superintendent or designee may reject a person's request or terminate a Volunteer's assignment at any time for any reason that is not unlawful. Volunteers may also be required to complete a background check at any time and hereby consent to such a background check.

A volunteer confirms that, to the best of their knowledge, the information provided within this form is true, complete, and accurate.

Volunteer Signature:			
Print Name		-	
For Internal Use			
□ Approved □	Not Approved	Date:	
Signature of District E	Employee:		
Volunteers must provi passport, or state-issu	•	noto identification (e.g., driver's license, d).	
Signature:		Date:	
Printed Name:		Date:	