

PINELLAS COUNTY SCHOOLS  
VOLUNTEER REGISTRATION FORM

Please **PRINT** legibly and complete the entire form, front and back.

Please **ATTACH A COPY OF YOUR LEGAL/GOVERNMENT ISSUED PHOTO ID** will be kept on file.

<b>LEGAL NAME</b> as it appears on your photo ID	_____																																		
	FIRST NAME				MIDDLE NAME				LAST NAME				MAIDEN NAME																						
<b>DATE OF BIRTH</b>				<b>GENDER</b>				<b>SOCIAL SECURITY NUMBER</b>																											
		-			-			<input type="checkbox"/> Male	<input type="checkbox"/> Female				-				-																		
MONTH MONTH				DAY DAY				YEAR YEAR																											
<b>RACE - CHECK ALL THAT APPLY</b>																																			
<input type="checkbox"/> White								<input type="checkbox"/> Black or African American								<input type="checkbox"/> American Indian or Alaska Native																			
<input type="checkbox"/> Asian								<input type="checkbox"/> Hispanic/Latino								<input type="checkbox"/> Native Hawaiian or Other Pacific Islander																			
<b>LEGAL PHOTO ID REQUIRED</b>																																			
Driver's License (State) _____												DL/ID Number _____																							
Identification Card (State) _____												DL/ID Expiration _____																							
<input type="checkbox"/> Military ID												<input type="checkbox"/> Passport (Do not print <b>Military ID/Passport</b> )												<input type="checkbox"/> Foreign ID (Country) & # _____											

Home Address: \_\_\_\_\_  
STREET
APT#
CITY
STATE
ZIP

Previous Address (if less than 5 years) \_\_\_\_\_  
STREET
APT#
CITY
STATE
ZIP

Home phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ **parent account ID:** \_\_\_\_\_

Employment or Organization represented: \_\_\_\_\_

Are you a current or former employee in Pinellas County Schools?  No  Yes Occupation: \_\_\_\_\_

School at which you want to volunteer: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Days & Times Available to Volunteer: \_\_\_\_\_

**Do you have a child/children attending this School?  No  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

**Check which school level(s) and volunteer position(s) you're interested in:**

- Elementary**
 **Middle**
 **High**
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Mentor                 | <input type="checkbox"/> Tutor<br>What subj: _____    | <input type="checkbox"/> Coach/Assistant Coach<br>What sport: _____   |
| <input type="checkbox"/> Take Stock In Children | <input type="checkbox"/> Classroom                    | <input type="checkbox"/> Speaker  |
| <input type="checkbox"/> 5000 Role Models       | <input type="checkbox"/> Clerical/Office              | <input type="checkbox"/> Media Center   |
| <input type="checkbox"/> Girlfriends            | <input type="checkbox"/> PTA/SAC                      | <input type="checkbox"/> Field Trip/Overnight Field Trip - <input type="checkbox"/> Driver <input type="checkbox"/> Chaperone |
| <input type="checkbox"/> Peer to Peer           | <input type="checkbox"/> Boosters<br>List Club: _____ | <input type="checkbox"/> Other _____  |

**Complete Back of Form**

Pursuant to School Board Policy 9180, volunteers who have unsupervised contact with students must be Level II screened.  
 All non-school board employees who are scheduled to attend overnight fieldtrips as chaperones/drivers must be Level II screened.

**YOU MUST COMPLETE AND SIGN THIS REGISTRATION FORM BEFORE WE CAN PROCESS IT.**

**Have you ever** had any altercation with any Law Enforcement Agency, pled nolo contendere or no contest to a charge, had an adjudication withheld, entered a **Pre-Trial Intervention** or **Diversion** program, had any offenses dropped or dismissed, been arrested or served time in jail, been convicted of a felony or misdemeanor, received a criminal traffic citation (including a DUI, driving with a suspended license and careless or reckless driving), or any criminal charge against you in the past (no matter how long ago) or have any charges now pending other than minor traffic violations. Also include any sealed or expunged convictions and any convictions or confirmations of child abuse or neglect.

\_\_\_ No \_\_\_ Yes

If **NO**, and after a background check, we find offenses, you will not be eligible to volunteer.

If **YES**, please list: all offense(s) and the disposition of the case(s) [example: ruled guilty, paid fine, pled no contest, accepted adjudication, PTI/PTD, etc.], date(s) of offense(s), and the location (state and county) where offense(s) occurred.

List ALL Offenses	Disposition	Date of Offense(s)	Location (State & County)

Pinellas County Schools reserves the right to refuse volunteer assignments to any individual whether or not he or she has been convicted of any offense. In completing this public document, please understand Pinellas County School's sincere concern for the safety of its students, staff and visitors.

**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. I also understand volunteers are not employees or personnel of the school board. My signature below certifies that I have reviewed the criminal offense statement and responded truthfully. **FALSIFICATION OR OMISSION OF THIS OFFICIAL PUBLIC DOCUMENT IS A CRIMINAL OFFENSE, CAN BE PROSECUTED, AND WILL CONSTITUTE GROUNDS FOR VOLUNTEER DISQUALIFICATION.**

I agree to maintain the **CONFIDENTIALITY** of student's information.

**X** \_\_\_\_\_

VOLUNTEER SIGNATURE DATE

The Pinellas County School Board is a public agency and subject to the Florida Public Records Act. All records, with certain limited exceptions, are subject to public viewing.

**VOLUNTEER ELIGIBILITY Policy**

The District Office will review all offenses to determine the outcome of your volunteer status and reserve the right to determine your eligibility status.

- **MAY NOT VOLUNTEER IF CONVICTED OF** any felony sexual related crimes, (including lewd and lascivious crimes) and felony child abuse.
- **MAY NOT VOLUNTEER IF CONVICTION WAS WITHIN THE LAST TEN (10) YEARS** for 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 FIVE (5) YEARS** for felony theft/economic crimes, misdemeanor crimes of violence (including violation of injunction of protection against domestic violence), misdemeanor drug crimes, and misdemeanor crimes involving weapons.
- **LIMITED VOLUNTEER:** May volunteer, but **MAY NOT HANDLE MONEY** if crimes involving worthless checks/petty/retail theft committed within the last five (5) years. May volunteer, but **MAY NOT DRIVE** students for DUI conviction within the past five (5) years. **MAY NOT DRIVE** students for two DUI convictions within the last ten (10) years. **MAY NEVER DRIVE** students if volunteer has three or more DUI convictions.
- **CASE BY CASE REVIEW:** Other misdemeanors – Multiple convictions – Pending charges – Other Restrictions

**APPEAL PROCESS FOR INELIGIBLE VOLUNTEERS – POLICY 9180**

Applicants appealing their ineligible status must provide an appeal letter that includes the circumstances surrounding any/or all criminal offense(s) for which the exemption is sought. The appeal letter and all supporting materials, e.g. police report, and letters of recommendations, are to be sent to the Office of Strategic Partnerships District Volunteer Coordinator. For all questions please call 727-588-5050.

**NOTE OF THE COLLECTION AND USE OF SOCIAL SECURITY NUMBER** PREPARED PURSUANT TO SECTION 119.07(15)(a), F.S. (2007)

Notice is hereby given that Pinellas County Schools collects social security numbers from individuals for the following purposes, which are either specifically, authorized by law or are imperative for the performance of the district's duties and responsibilities as prescribed by law: Employment eligibility, Criminal Background Screening, Certification/Contributions Tracking of students as required by State Board Rule, Tracking and reporting of Corporate Tax Credit Scholarship students as required by State Board rule, Student identification numbers State directory of new hires, Annual report of wages and individuals, Record of remuneration paid to employees and Unemployment benefits.

*The School Board of Pinellas County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, sexual orientation or disability in any of its programs, services or activities.*