

450 West 6<sup>th</sup> Street Yuma, AZ 85364 (928) 502-4300

## **VOLUNTEER APPLICATION**

Please read, fill out the areas of interest, fill in all areas pertinent to you and return to the school where you wish to volunteer.

Name:	Phone:		
Address: Street Address	City	ZIP	
I would like to help the following day(	(s) and time(s):		
I prefer to work with:			
School	Teacher	Grade	
Do you currently have children attendi	ng our schools? If so, where	?	
List languages other than English that	you speak:		
Check the areas where you would like	to help:		
Help in my child's classroom Whi	ich classroom?		
Help in any classroom Tutoring	Chaperone Other (specify)		
We all have hobbies and interests we e	enjoy. What are some of your hobl	bies and interests?	

### VOLUNTEER SUPPLEMENTAL INFORMATION

All information will be kept confidential and used only by Yuma School District One personnel. Volunteer placement will not be made without this supplemental information.

Yuma School District One requires proof of immunity to measles and rubella for all staff members, including all volunteers working directly with students, if the volunteer's birth date is after January 1, 1957. The Measles, Mumps, Rubella (MMR) shot can be obtained for \$67.00 from the Yuma County Health Department, or contact your family physician for information. Please call YCHD at 928-317-4550 for an appointment.

Please give your birth date: \_\_\_\_\_\_. If after 1/1/1957, please provide documentation of measles/rubella immunization or immunity.

#### REFERENCES

Please list three friends or employers who have known you for at least 2 years. (We can process the application more rapidly if you provide <u>local</u> references).

Name:	
Mailing Address:	
Phone:	E-mail:
Name:	
Phone:	E-mail:
Name:	
Mailing Address:	
Phone:	E-mail:
	t One to contact any of the references listed above. I also authorize e a written character reference, if required.
Have you ever been convicted of	a misdemeanor or a felony?
been convicted of a dangerous crime	iminal acts; employment with children; classification, school volunteers must not have against children. It is unlawful for a person who has been convicted of a dangerous ection 13-604.01 to fail to give notice of the fact of the conviction to schools when ng for service.
Have you ever been convicted of	a felony crime against children?
Signature:	Date:
A fingerprint clearance card mu information on how to obtain on	ist be obtained prior to volunteering, please call the District Office for

## YUMA SCHOOL DISTRICT ONE VOLUNTEER PROGRAM

# **Registration/Emergency Form**

City	ZIP
pol(s):	
School:	Teacher/Grade:
ent/emergency, whom s	hould we contact? (Please print.)
Telephone:	
	Telephone:
	City you during school hours: bol(s): School: School: School: School: City ent/emergency, whom s