

FAMU DEVELOPMENTAL RESEARCH SCHOOL VOLUNTEER PROGRAM

2016-2017 Volunteer Application

PART A. (REQUIRED) (Please **print** clearly). Completion of Part A on this form is **required** for a volunteer to be eligible for volunteer placement and insurance coverage for accidents which occur while performing assigned school volunteer activities. FAMU Developmental Research School reserves the right to **accept, decline or discontinue** the services of any volunteer.

Name _____
(First) (Middle) (Last)

Address _____

City _____ State _____ Zip Code _____

Email Address _____ @ _____ D.O.B. _____

Phone Numbers Home _____ Cell _____ Work _____

Emergency Contact (Name) _____ Relation _____ Phone Number _____

Check one of the following: Male Female Age Range: Under 21 21-61 61+

Are you a college student? Yes No If so, what College/University? _____

Are you required to volunteer for a course or your major? Yes No

If yes, what is your major and what class are you enrolled in? _____

Type of Volunteer

Check all that apply: School Parent School Grandparent City/County Employee
 State Employee Other _____

Have you served as a school volunteer before? Yes No If so, where? _____

Important Volunteer Policies and Guidelines

1. All volunteers **must complete a new Volunteer Application each year.**
2. All volunteers **must sign in at the school office before proceeding to their volunteer assignment.**
3. Volunteers **may not dispense either prescription or over-the counter medications to students.**
4. Volunteers **may not administer any form of corporal (physical) punishment to students.**
5. Volunteers **must respect a student's right to confidentiality** (Florida Statue 1002.22) including the following areas: standardized test scores, grades, attendance records, health information, academic work completed, family background information, reports of serious behavior patterns and written teacher observations.
6. A National Sexual Predator Check will be processed on all school volunteers. **Volunteering is contingent upon background check clearance.**

Volunteer Agreement (Please read and sign below)

As a volunteer, I agree to abide by the policies and/or procedures of the School Board of FAMU Developmental Research School, of the FAMU Developmental Research School Volunteer Program in which I serve.

Signature of Applicant _____ Date _____

PART B. Volunteer Information (Optional).

If you have children attending FAMU DRS, please list their name(s) and grade(s) below:

I am interested in volunteering with one of the following programs:

Classroom Assistant Library P.E./Sports PTA Booster Club Clerical Chaperone
 Reading Programs Extended Day Program (Afterschool) Mentor a student * Computer Lab Math
 Foreign Language Science History Music/Band Fund-raising Art Other _____

***Fingerprinting Required**

Grade Level Preference: K-2 3-5 6-8 9-12

Classroom Resource/ Speaker Topics/Career/Talents/Languages/Hobbies/Travels/Other: _____

Days and Times of Availability:

Time Available	Monday	Tuesday	Wednesday	Thursday	Friday
A.M.					
P.M.					

For Official Use Only

National Sexual Predator Check Processed By: _____	Date: _____
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