



Franklin County  
School District

# Application to Volunteer 2021-2022

Franklin County Public Schools  
85 School Rd. Eastpoint, Florida 32328

**OFFICIAL USE ONLY**

Approved  Disapproved

Thank you for your interest in becoming a volunteer! Please complete this entirely before returning. Application must be returned to the PR Dept. at the Franklin County District Office or emailed to Morgan Martin @ [mmartin@franklincountyschools.org](mailto:mmartin@franklincountyschools.org). We appreciate you offering your time, talents, and skills to enhance the education of our students.

Signature: \_\_\_\_\_

**Print/Type** Name: \_\_\_\_\_  Male  Female  
First MI Last

Mailing Address: \_\_\_\_\_  Over 18 yrs. old  
Street City State Zip

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_ Second Language \_\_\_\_\_  
Primary Optional

Driver's License: \_\_\_\_\_ or Passport/State ID: \_\_\_\_\_  
State Number Expiration Date Number

*\*Applicants MUST attach a photocopy of his/her Driver's License or State Photo ID*

**I am interested in the following volunteer placements:** (check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> K-2 Classroom | <input type="checkbox"/> Library/Media Center | <input type="checkbox"/> M/S Classroom                |
| <input type="checkbox"/> 3-5 Classroom | <input type="checkbox"/> Clerical/Office      | <input type="checkbox"/> H/S Classroom                |
| <input type="checkbox"/> Field Trips   | <input type="checkbox"/> Pre-K                | <input type="checkbox"/> Academy Program _____        |
| <input type="checkbox"/> Elem. PE      | <input type="checkbox"/> Coaching*            | <input type="checkbox"/> The Nest (Afterschool) _____ |
| <input type="checkbox"/> Elem. Art     | <input type="checkbox"/> PTA/PTO              | <input type="checkbox"/> Mentor* _____                |

List career experiences, talents, skills, hobbies or activities of interest:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*\*If you are volunteering to coach, please provide the AD with proper forms  
 Mentors will need to complete additional training scheduled through the district office.*

I am available: M  T  W  TH  F  Times: \_\_\_\_\_ Short term (2-4 weeks)  Long term (+4 wks.)

Relationship to Child(ren):  Parent  Stepparent  Legal Guardian  Grandparent  other \_\_\_\_\_

**Confidentiality of Student Records**

The following portions of a student's record are confidential pursuant to Florida Statute 1002.22

- Completed academic work
- Grades
- Standardized test scores, including academic, intelligence, aptitude, and psychological tests
- Attendance records
- Health data
- Student identifying data
- Teacher rating & observations
- Interest inventory reports
- Counselor rating/observations
- Discipline reports or information
- Family background information

Volunteers must comply with Florida Statute requirements in regard to a child's privacy rights. The above items and anything else dealing with personal information about the student, are not to be discussed with anyone other than the teacher with whom the volunteer works, the counselor at the school, or the principal. Failure to respect these privacy rights has legal consequences. Florida Statute also specifies that parents of a child whose privacy rights are not respected have a right to court action to enforce the violated right by injunction.

**➔** I HAVE READ THE ABOVE AND WILL AGREE TO COMPLY WITH THESE STATUTES.

**VOLUNTEER APPLICANT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

## BACKGROUND SCREENING

\*\*Applicant must attach a photocopy of his/her Driver's License or State ID\*\*

Please note that the information on this side of the volunteer form is not subject to Public Record.

All volunteer candidates with the Franklin County Public Schools are subject to a criminal history check. In Florida, the entire arrest record is revealed to school districts, including sealed and/or expunged records and military court proceedings. Applicants must disclose this information even if told differently by a lawyer, judge, or other law enforcement individual. If you were given this information by a judge then written documentation will need to be provided to the FCSD. Information that must be disclosed below includes any offense that occurred whether as a juvenile or adult. Eligibility to volunteer will be determined in accordance with Florida Statute 435.04 and 943.04351 (2015). Prior criminal records may or may not result in disqualification for volunteering.

An applicant's criminal history includes any offense for which the applicant posted bail; entered a pre-trial diversion program, pre-trial intervention program, teen or drug court or juvenile program; had adjudication withheld; was convicted or found guilty; was placed on probation; pled guilty or no contest; was jailed or imprisoned; or appeared in court as a juvenile or adult. Sealed records, expunged records or military court proceedings must be disclosed. *Note: DUI and reckless driving are criminal offenses.*

All criminal histories must be provided regardless of the number of years since the arrest.

Social Security Number \_\_\_\_\_ Place of Birth (City/State/Country) \_\_\_\_\_

- Yes  No Have you ever been convicted of, had adjudication withheld in, pled nolo contendere (no contest) to, completed a pre-trial intervention program or been found guilty (*as a juvenile and/or an adult*) of a felony offense? (DUI and DUI Convictions must be reported.)
- Yes  No Have you ever been convicted of, had adjudication withheld in, pled non contendere (no contest) to, completed a pre-trial intervention program or been found guilty (*as a juvenile and/or an adult*) of a misdemeanor offense?
- Yes  No Are there currently any criminal charges pending against you?
- Yes  No Are you currently in a pretrial diversion/intervention program or currently serving parole or probation?

If you answered "yes" to any of the questions above, please provide details below. Attach separate sheet if needed.

Date (mm/yyyy)	County, State, Country	Nature of Charge	Level of Offense	Disposition

I hereby consent to the release of my adult and/or juvenile delinquency records (if any) to the School Board of Franklin County, Florida and further agree that if any misrepresentation has been made by me, any offer of volunteer service may be withdrawn or my volunteer service terminated immediately without any obligation or liability to me. I also consent that I have reviewed all information provided and all is true and correct to the best of my knowledge. *NOTE: If you are considered eligible for volunteering under the above guidelines, this eligibility does not guarantee volunteer placement/or employment with FCSD.*

VOLUNTEER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICIAL USE ONLY**

Placement Area \_\_\_\_\_

Placement Supervisor Interview/Orientation Date \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Principle signature \_\_\_\_\_