



# 2018-2019 Volunteer Application

We conduct a background check on each applicant. **You will not be approved** if you have criminal convictions (drug-related offenses, contributing to the delinquency/dependency of a child, abuse/neglect, or other serious crimes).

**Please follow these steps to become an approved volunteer:**

1. Fill out application neatly & completely.
2. The school will pay the screening cost for parents and/or legal guardians only. Other family members or other applicants must pay a nonrefundable \$24 processing fee.
3. For processing, obtain \$24 money order or certified check payable to: **Lake Wales Charter Schools**. (WalMart and Amscot may offer free money orders; certified checks available at banks.)
4. Return application & payment (if applicable) to school. School will notify you when approved.

Submit all applications by Feb. 15

School: \_\_\_\_\_ LWCS Employee

Are you the parent or legal guardian of a child at this school? Yes No

Student's name: \_\_\_\_\_ Student's teacher/grade: \_\_\_\_\_

### Information about Volunteer Applicant

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Previous Last Name(s): \_\_\_\_\_

\*Social Security Number: - - - \*Required for background check/required to be LWCS volunteer

Gender: Male Female Date of Birth: / /

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

I specifically authorize the release of my confidential criminal history to the Lake Wales Charter Schools pursuant to The National Child Protection Act and FS943.0542. Volunteers may challenge the record only as provided in FS 943.056. I affirm that my responses are true, complete and correct to the best of my knowledge and are made in good faith. I agree to abide by the guidelines and procedures of the School Volunteer Program. I understand that all involvement with students is restricted to approved school activities. I understand that the Lake Wales Charter Schools Workers' Compensation program does not cover school volunteers, and I am responsible for any accident or medical expenses that I incur while volunteering.

Signature \_\_\_\_\_ Date \_\_\_\_\_