



# Volunteer Application

Thank you for your willingness to become a school volunteer. For the safety of students and staff, we conduct a background check on each volunteer applicant. **You will not be approved** if you have been convicted of charges such as criminal driving offenses, drug-related charges, contributing to the delinquency/dependency of a child, abuse/neglect, kidnapping/battery to a child, obscenity or pornography, prostitution or solicitation of prostitution, sexual misconduct, soliciting lewd acts or indecent exposure, lewd or lascivious acts, sexual offenses such as sexual battery, murder, etc.

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

1. Check with the school to be sure you aren't already an approved volunteer.
2. Read application carefully (*see first paragraph*) to make sure you qualify. Then complete form neatly and accurately. Provide as much information as possible – the screening may include a search of state/national databases.
3. The school will pay the screening cost for parents and/or legal guardians only. All other family members or other volunteer applicants must pay a \$24 processing fee, which is nonrefundable.
4. To pay for processing, please obtain a \$24 money order or \$24 certified check payable to: **Lake Wales Charter Schools**. (WalMart and Amscot sites may offer free money orders; grocery stores charge a fee; certified checks are available at banks.)
5. Return application with payment (if applicable) to school, which will notify you when you are approved.

No applications processed after 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: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
No SSN

Gender: Male Female Race: African-American White Hispanic/Latin Other \_\_\_\_\_

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

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

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

Email \_\_\_\_\_

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 rules and regulations of the School Volunteer Program. I understand that all involvement with students is restricted to approved school activities.

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

The Lake Wales Charter Schools prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, material status, age, homelessness, or disability or other basis prohibited by law in any of its programs, services, activities or employment. To file your concerns, you may contact the Office of the Superintendent at 863-679-6560.