

SCHOOL DISTRICT OF FREDERIC

Volunteer Application

2024-2025 School Year

Completion of both sides is required. Please print clearly. If approved by the building administrator a background check will be conducted by the District Office. You will then receive an email regarding your approval status.

Location: ☐ 6-12 ☐ elementary ☐ Other _____

Nature of Application: ☐ Chaperone ☐ Other _____

Section 1:

Current Full Name: _____

Address: _____

Telephone: _____ (Home) _____ (Work) _____ (Cell)

E-Mail: _____

Section 2:

Volunteer activity/assignment(s) for which you are applying: _____

When are you available (weekdays/hours)?: _____

List any specific training (i.e. First Aid, CPR, etc.), education (diplomas or degrees, etc.) or experiences that you have:

Have you ever been employed by the Frederic School District? ☐ Yes ☐ No

If so, When? _____

Section 3:

Name of Field Trip: _____ Dates: _____

Student Relation Name(s): _____

Have you ever been convicted, pled nolo contendere (i.e. "no contest") to any offense or violations (including felonies, misdemeanors, or municipal ordinance violations) other than minor traffic violations?

☐ Yes ☐ No

If yes, list all pending charges from violations: _____

Please Complete Both Sides

Background Check Information

The School District of Frederic does not discriminate on the basis of race, religion, national origin, ancestry, creed, pregnancy, marital status, sexual orientation, or physical, mental, emotional or learning disability. Federal law prohibits discrimination in education and employment on the basis of age, race, color, national origin, sex, religion, or disability.

Name(s): List any names (aliases) you've had during the last 7 years. Attach another paper if you need more space.

Last

First

Middle

Current Full Name: _____

Prior Full Name: _____

Prior Full Name: _____

Other identifying data:

Social Security # _____ Gender: ☐ Male ☐ Female

Date of Birth: _____ Race: _____

Address(es):

List all addresses where you have lived at any time during the last 7 years. Provide actual physical address, not PO Boxes. Attach another paper if more space is needed.

Current: Street Address: _____

City, State, Zip: _____ Dates (from/to): _____

Prior: Street Address: _____

City, State, Zip: _____ Dates (from/to): _____

My signature below indicates that I have read the Frederic School Board Policy, Community Engagement (Volunteers) -811, completed this application accurately and truthfully, and understand that the district will be conducting a background check and to verify any and all information. I understand the information obtained by the district may be available for review by others under Wisconsin's Public Records law and that the District will, to the extent permissible, protect certain information such as home address, personal telephone number(s), social security number, and personal email address(es).

Signature: _____ Date: _____

SCHOOL/DISTRICT OFFICE USE ONLY

Background check run by: _____

Cleared by District Office: ☐ Yes ☐ No Date: _____

Approved Assignments: _____

Signature of Approving Building Administrator _____ Date _____

Signature of Approving District Administrator _____ Date _____

Please Complete Both Sides