Robertson County Public Schools
VOLUNTEER APPLICATION FORM

Name		
Address	Home Phone	Work Phone
City	State	Zip
Contact in case of emergency	Relationship	Phone

Do you have child(ren) in school? *If more than three, list on back of sheet* ☐ YES ☐ NO

Child's last name	Child's first name	School Name
Child's last name	Child's first name	School Name
Child's last name	Child's first name	School Name

Employer	Job Title	Hours you work

List volunteer interests, skills, hobbies, languages you speak

Availability:	Special Projects	Long-Term	Hours Per Week	Per Month

Type of work you would like *(check all that apply)*:

- ☐ work with students
- ☐ work in office, copy room
- ☐ special events or activities
- ☐ making/repairing things
- ☐ business or computer related
- ☐ other _____

References, excluding family *(include name, address, phone number)*

1.
2.

Volunteer Program Participation Statement

I AGREE to submit to a criminal records check, attend an orientation or training session, abide by school rules and Board of Education regulations and policies that apply to volunteers, and honor my commitment to work as scheduled.

CONFIDENTIALITY – I understand that any information concerning any teachers or students is to remain confidential, and not be discussed outside of the school. If there is a problem that you need to discuss, please see the school Principal or Superintendent.

Volunteer Signature *Date*

District Volunteer Coordinator *Date*

Principal Signature *Date*

List all school names

**Copy on file at FRC*