



# FORT ZUMWALT SCHOOL DISTRICT

Working Together We Are Making A Difference

## School Volunteer Request

(Categories 2 and 4)

School:

Volunteer's Name (Last, First, M.I.):

Date of Birth:

Street Address:

City:

Zip Code:

Home Telephone #:

Work or Cell #:

E-Mail Address:

Child's Name (If Applicable):

Grade/Teacher:

Check here if OASIS Volunteer

### AVAILABILITY

Time of Day:	Frequency:	Areas of Interest:

Background checks are performed on all Fort Zumwalt Volunteers who will be working around students. Volunteers are expected to adhere to all Board of Education and building policies and procedures, including confidentiality of student information. Thank you for your assistance in your child's school. If you have any questions, please contact your building administrator.

Volunteer's Signature:

Date:

#### FOR OFFICE USE ONLY-To be monitored in Building

National and State Sex Offender List Checked (Category 2 and 4):

Date:

Initials:

MO Case Net Checked (Category 2 and 4):

Date:

Initials:

MO State Highway Patrol Criminal Background Check submitted to DAO (Category 2 Only):

Date:

Results of MO State Highway Patrol Criminal Background Check received (Category 2 Only):

Date:

*In case of emergency, please contact:*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone Number