



Volunteer Application

A volunteer tutoring program of Fort Wayne Community Schools

Personal

Name: _____ Maiden Name: _____

Home address: _____ City: _____ State: _____ Zip: _____

E-mail: _____

Home phone number: _____ cell phone: _____

Employment

I am presently: working full-time working part-time high school student retired
 homemaker unemployed college student

Job Title/Position: _____ Company: _____

Address: _____ City: _____ Zip: _____

Business phone: _____ I prefer correspondence be mailed to: home work

Education

Highest level completed: high school college graduate school

College degree(s): _____

Experience/Skills

Volunteer experience: _____

Work experience: _____

Special skills/interests: _____

Optional Demographic Information (for nondiscrimination reporting purposes)

Gender: male female

Age: under 18 19-24 25-34 35-49 50-64 65+

Race: African-American Asian Caucasian Hispanic Other

Reference

Name: _____ Phone: _____ e-mail: _____

Address: _____ City: _____ State: _____ Zip: _____

How did you hear about Study Connection? _____

State briefly why you would like to become a volunteer: _____

Volunteer Positions – please indicate your choice from the following categories:

Tutor (during after school hours)

Grade level: K-2 3-5 6-8 9-12

If you are volunteering with a group, please check one:

Full-time tutor Substitute

Buddy (share a student with another tutor), Buddy's name: _____

If you are volunteering with a group, name of the company/organization: _____

Site Director (coordinator for a study site)

Classroom Coach (between 9:00 a.m. to 3:30 p.m., matched to a classroom rather than one-to-one with a student)

Grade level: K-1 2-3 4-5

Day(s) you are available to volunteer: Monday Tuesday Wednesday Thursday

BACKGROUND INFORMATION: (A conviction does not automatically disqualify you from being approved.)

Other than a minor traffic violation, have you ever been arrested for or convicted of a crime that has not been expunged by a court? Yes No

If yes, please continue below:

Misdemeanor Felony Year State

Explanation: _____

Do you currently have any pending criminal charges? Yes No

If yes, please explain: _____

Applicant must attach a photocopy of a valid government issued photo I.D. Thank you.

Statement of Commitment:

As a volunteer/independent contractor working with FWCS students, I agree to abide by all school rules and FWCS Board of Trustees School policies, authorize the release of information for a background check which will be in effect for twelve (12) months or the length of the assignment, honor the commitment to work as scheduled and notify in advance of absence, and communicate regularly with school personnel. I am aware and agree that all volunteer requirements including, but not limited to: background check and National Sex Offender Registry must be met before I can begin volunteering or working as an independent contractor with Fort Wayne Community Schools.

Signature: _____ Today's Date: _____

**Send completed form to: FWCS Community Programs, 230 E. Douglas Ave., Fort Wayne, IN 46802.
Questions? Please call 467-8810. Thank you.**

NOTICE TO VOLUNTEERS REGARDING BACKGROUND INVESTIGATION

I understand that a consumer report (background screening report) and/or an investigative consumer report (reference checks and/or interviews) that may include information from public or private sources regarding my character, driving records, criminal history, court records (both civil and criminal), qualifications and experience, work habits, and/or other information relevant to my volunteer service may be obtained in connection with my application as a volunteer with FORT WAYNE COMMUNITY SCHOOLS.

I understand that, if I am approved for volunteer service by FORT WAYNE COMMUNITY SCHOOLS, this background check authorization will be kept on file and may be used at any time during my service to procure further information when, in the judgment of FORT WAYNE COMMUNITY SCHOOLS, such may be necessary.

I hereby release and discharge to the extent permitted by law, FORT WAYNE COMMUNITY SCHOOLS, its employees, any individual or agency obtaining information for FORT WAYNE COMMUNITY SCHOOLS, and any personal or professional reference, from any and all claims, damages, losses, liabilities, costs or other expenses arising from the retrieving, reporting and/or disclosure of information in connection with this background investigation.

I understand that I am volunteering my services and declare in no way shall I be considered an employee or subcontractor or independent contractor of FORT WAYNE COMMUNITY SCHOOLS.

By signing below, I, _____, have read, understand and consent to the above. I further authorize that a photographic copy or a telephonic facsimile of this document shall be valid for purposes present and future. MY signature below certifies that all information I have provided in connection with this background check is true, accurate and complete to the best of my knowledge.

I understand that I have specific prescribed rights as a consumer under the Fair Credit Reporting Act and may have additional rights under relevant state laws. I hereby certify that I have read the Summary of Rights under the Fair Credit Reporting Act located at <http://www.ftc.gov/bcp/online/pubs/credit/fcrasummary.pdf>.

AUTHORIZATION

| | |
|---|------------------------|
| _____ | _____ |
| Print Full Name | Social Security Number |
| _____ | _____ |
| Date of Birth (MM/DD/YYYY) | Drivers License Number |
| _____ | _____ |
| _____ | Drivers License State |
| Any other names I have been known by: _____ | |
| Current Address: _____ | |
| Previous Addresses (Last 10 Years): _____ | |
| _____ | |
| _____ | _____ |
| Signature | Date |