

OHHS

SMS

SES

RCS

WEST BRANCH-ROSE CITY AREA SCHOOLS VOLUNTEER APPLICATION

For Administrator Initials ICHAT

Important Notes: (1) Volunteer applications received immediately prior to an event may not be processed in time for a volunteer to be cleared for that particular event. It may take up to 2 weeks to process an IChat. (2) By submission of this application you expressly give West Branch-Rose City Area Schools permission to run a criminal background check using the Michigan State Police IChat system. (3) By signing this application I am releasing West Branch-Rose City Area Schools of any obligation should I become ill or receive an injury as a result of my volunteer services.

Only one volunteer name per application - All Fields are Mandatory

POSITION YOU WISH TO VOLUNTEER FOR:

FULL PRINTED NAME

First Middle Last

Maiden name or any other name(s) previously used, or enter 'none':

YOUR Date of Birth / / Gender: Male Female Eye Color: Height: ' "

RACE: White Black Asian or Pacific Islander American Indian or Alaskan Native Other/Unknown

PRESENT PHYSICAL ADDRESS (No P.O. Boxes on this line)

Number Street City State MI Zip

MAILING ADDRESS (Only if different from above - and/or - enter P.O. boxes here)

Number Street or PO Box City State MI Zip

PHONE NUMBER () - Alternate Phone Number () -

One name per line (as applicable):

- 1. First child/student's name & Grade Level Your relationship to above listed student
2. Second child/student's name & Grade Level Your relationship to above listed student
3. Third child/student's name & Grade Level Your relationship to above listed student
4. Fourth child/student's name & Grade Level Your relationship to above listed student

Dated:

Signature of Applicant

Central Office Use Only: Approved Denied

Dated:

Denial Letter Sent on Date (Copy of Denial Letter Attached)

Superintendent Signature