



Independent School District Boise City VOLUNTEER APPLICATION

The information on this form will be used to match as closely as possible your skills and interests with the volunteer opportunities available in the Boise School District. If applying for Mentoring Program, please contact your school counselor.

NAME _____ DATE _____

ADDRESS _____

E-MAIL ADDRESS _____ PHONE (H) _____
(W) _____
(Cell) _____

EDUCATION COMPLETED: High School _____ College _____ Other (explain) _____

Briefly explain why you wish to volunteer in the Boise School District: _____

List your interests, special skills, and hobbies that you could bring to the curriculum of the Boise School District: _____

Please check the school(s) in which you would like to volunteer (if you have a preference):

- | | | | |
|---|--|-------------------------------------|--|
| Elementary Schools | <input type="checkbox"/> Monroe | Junior High Schools | Other Schools |
| <input type="checkbox"/> Adams | <input type="checkbox"/> Morley Nelson | <input type="checkbox"/> East | <input type="checkbox"/> Boise Language Academy |
| <input type="checkbox"/> Amity | <input type="checkbox"/> Mountain View | <input type="checkbox"/> Fairmont | <input type="checkbox"/> Dennis Technical Education Center |
| <input type="checkbox"/> Collister | <input type="checkbox"/> Owyhee | <input type="checkbox"/> Hillside | <input type="checkbox"/> Frank Church High |
| <input type="checkbox"/> Cynthia Mann | <input type="checkbox"/> Pierce Park | <input type="checkbox"/> Les Bois | <input type="checkbox"/> Madison Early Childhood Center |
| <input type="checkbox"/> Garfield | <input type="checkbox"/> Riverside | <input type="checkbox"/> North | <input type="checkbox"/> Marian Pritchett |
| <input type="checkbox"/> Grace Jordan | <input type="checkbox"/> Roosevelt | <input type="checkbox"/> Riverglen | <input type="checkbox"/> Treasure Valley Math & Science Center |
| <input type="checkbox"/> Hawthorne | <input type="checkbox"/> Shadow Hills | <input type="checkbox"/> South | |
| <input type="checkbox"/> Hidden Springs | <input type="checkbox"/> Trail Wind | <input type="checkbox"/> West | |
| <input type="checkbox"/> Highlands | <input type="checkbox"/> Valley View | | |
| <input type="checkbox"/> Hillcrest | <input type="checkbox"/> Washington | High Schools | |
| <input type="checkbox"/> Horizon | <input type="checkbox"/> White Pine | <input type="checkbox"/> Boise | |
| <input type="checkbox"/> Jefferson | <input type="checkbox"/> Whitney | <input type="checkbox"/> Borah | |
| <input type="checkbox"/> Koelsch | <input type="checkbox"/> Whittier | <input type="checkbox"/> Capital | |
| <input type="checkbox"/> Liberty | <input type="checkbox"/> Wm. H. Taft | <input type="checkbox"/> Timberline | |
| <input type="checkbox"/> Longfellow | | | |
| <input type="checkbox"/> Lowell | | | |
| <input type="checkbox"/> Maple Grove | | | |

Are you a legal parent or guardian of a child in the school where you seek to volunteer? _____

Type of volunteer work preferred – check all that apply:

Project Tutor: Preference tutoring Math _____ or Reading _____

- | | | |
|--|---|--|
| <input type="checkbox"/> computer assistance | <input type="checkbox"/> creative writing | <input type="checkbox"/> media center assistance |
| <input type="checkbox"/> science | <input type="checkbox"/> clerical assistance | <input type="checkbox"/> art |
| <input type="checkbox"/> music | <input type="checkbox"/> English as a Second Language | <input type="checkbox"/> physical education |
| <input type="checkbox"/> mentor | | |

If you are able to speak a foreign language please indicate which one(s): _____

Would you be comfortable working with students in Special Education? yes no

Can you volunteer one hour twice a week during the school year and school day? yes no

Is this request to volunteer motivated by a requirement for college coursework/department? yes no

If yes, please complete the following: Major _____ Year _____

Most opportunities for volunteers in the schools are between 8:30 a.m. and 3:00 p.m.

Please indicate the best times for you—we request one hour per week.

	Monday	Tuesday	Wednesday	Thursday	Friday
Time	_____	_____	_____	_____	_____

Please list brief employment/volunteer history:

Job/Volunteer Title	Place of Work	# of years
1. _____		
2. _____		

Please list two references (excluding family):

Name	Address (include e-mail, if available)	Phone (work and home)	Relationship
1. _____			
2. _____			

Do you have any special needs that would assist or hinder your performance as a volunteer?

Volunteer Disclosure Statement

It is the policy of the Boise School District to make every reasonable effort to provide a safe learning environment for students working with volunteers. Therefore, the District requires the following confidential information from volunteers who work directly with students or assist staff on a regular basis; supervise/chaperone students; or act as a primary authority figure. This statement must be completed and returned prior to beginning any volunteer experience.

1. Have you ever plead guilty or 'no contest,' receive a withheld judgment, or been convicted of a felony or misdemeanor under Idaho law or any other state/country law?

_____Yes _____No

If yes, please explain: _____

2. Have you ever been convicted of ANY sex, alcohol or drug related offense?

_____Yes _____No

If yes, please explain: _____

3. Have you ever been convicted, or had an administrative finding, of violating any law involving child abuse, sexual abuse, physical abuse, sexual harassment or exploitation, or any other crime related to children?

_____Yes _____No

If yes, please explain: _____

4. Have you ever been the subject of or listed as the perpetrator in a founded child abuse report?

_____Yes _____No

If yes, please explain: _____

5. Are you required to register as a sex offender with the Sex Offender Registry?

_____Yes _____No

If yes, please explain: _____

6. Do you currently have charges pending, or are there any ongoing investigations relating to any of the aforementioned?

_____Yes _____No

If yes, please explain: _____

7. Has your driver's license ever been suspended or revoked for any reason? (answer to be used in determining volunteer drivers)

_____Yes _____No

If yes, please explain: _____

'Yes' answers may require the applicant to provide court documentation and/or a letter of explanation. Please know that the District may review the Department of Law Enforcement Sex Offender Registry of Idaho and/or ask for a background check at any time.

I understand that any misrepresentation or material omission made by me on the application will be sufficient cause for cancellation of this application or immediate termination of my volunteer assignment, whenever it may be discovered.

Signature: _____ Date: _____



The Independent School District of Boise City

8169 West Victory Road
Boise, ID 83709

(208) 854-4070
Fax (208) 854-4010



The Independent School District of Boise City

Volunteer Information and Receipt of Acknowledgement Forms

Name _____ Date _____
(Last) (First) (MI)

Address _____ Phone _____
(Street)

(City) (State) (Zip)

School(s) to volunteer: _____

This checklist identifies the items that you must acknowledge you have received and reviewed. Please acknowledge receipt of each item by initialing each line as you review the materials. Online copies of District Policies are available at www.boiseschools.org/board/policy/

District Policies

- _____ Sexual Harassment Policy No. 3232
- _____ Visitor Identification Policy No. 3311
- _____ Boise School Volunteers Service Programs Policy No. 4220
- _____ Employee or Public Smoking Policy No. 5232
- _____ Drug Free Workplace Policy No. 5231

I, the undersigned, do hereby certify that I have been informed of and reviewed the above Boise School District Board Policies, procedures and information.

Signature of Volunteer

Signature

Date

"Educating Today For a Better Tomorrow"

An Equal Opportunity Employer-Educator