



PAMLICO COUNTY SCHOOLS VOLUNTEER APPLICATION

Name _____ Date of Application _____

Address _____

City _____ State _____ Zip _____

Telephone _____ (home) _____ (work)

Email Address _____

EDUCATIONAL RECORD

SCHOOLS	NAME AND ADDRESS OF SCHOOL	YEARS ATTENDED	CIRCLE THE LAST YEAR THAT YOU COMPLETED	DID YOU GRADUATE?
High School			9 10 11 12	
College			1 2 3 4	Degree
Other (Specify)				

Please give your reasons for wanting to volunteer with Pamlico County Schools. _____

For what activity/program would you like to volunteer? _____

At which school would you like to volunteer?

☐ All Schools
 ☐ Pamlico County Primary School
 ☐ Pamlico County Middle School
☐ Fred Anderson Elementary School
 ☐ Pamlico County High School

Describe previous volunteer experience, if any. _____

BACKGROUND INFORMATION

Give any other names by which you have been known _____

List all states in which you have lived (other than North Carolina) and approximate dates. If more than three, please attach additional information on a separate sheet of paper.

State _____ Dates: (from) _____ to _____

State _____ Dates: (from) _____ to _____

State _____ Dates: (from) _____ to _____

➤ *Do you have any charges pending, other than minor traffic violations?*

() Yes () No

➤ *Have you ever been convicted of any crime or misdemeanor other than a minor traffic violation?*

() Yes () No

**If yes to either question, please write on a separate sheet of paper a brief description of the charges or convictions. **

REFERENCES:

List a minimum of three (3) references, preferably those acquainted with your qualifications. With the completion of this application, you are authorizing Pamlico County Schools to request confidential recommendations from your listed references. References are checked by phone. Please give accurate addresses and telephone numbers.

Name	Address	Telephone	Occupation

CERTIFICATE OF APPLICANT: I certify that all statements made on this application are true and complete, accurate and not misleading to the best of my knowledge. I understand that any false statements, incomplete statements, or misrepresentations may subject me to disqualification or dismissal as a volunteer. I further understand that I must report to the Principal any criminal charges or convictions that occur after the date of this application. A copy of this authorization shall be as effective as the original.

Signature of Applicant _____

Date _____

Pamlico County Schools does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities.

For official use only

Criminal Background Check: Approved _____ Denied _____

Signature _____ Date _____

Central Office Personnel

Reference Check: Approved _____ Denied _____

Signature _____ Date _____

Principal or Designee

AUTHORITY FOR RELEASE OF INFORMATION

I authorize The Chapman Corporation and the NC Department of Justice through the State Bureau of Investigation (SBI)/Federal Bureau of Investigation (FBI) and Pamlico County Schools to perform a criminal history record check for serving as a school volunteer with Pamlico County Schools pursuant to N.C.G.S. 114-19.2 and 115C-332.

Last Name

First

Middle

Maiden

(Print or Type)

Social Security
Number

Date of Birth

Sex

Race

I understand that The Chapman Corporation and its employees, as well as the Pamlico County Board of Education, shall not be held legally accountable in any way for providing this information to the above named school, and hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the school cannot release the results of this criminal history record check to me.

Applicant's/Employee's Signature

Date
