The Villages® Charter School

FOR THE SAFETY AND PROTECTION OF OUR STUDENTS, A BACKGROUND CHECK MAY BE DONE ON PERSONS WHO PARTICIPATE IN STUDENT CONTACT ACTIVITIES.

I decline to provide this information and realize that this action will affect my ability to participate in student supervision events. ☐

Being convicted of a crime or having adjudication withheld will not necessarily prohibit you from being approved as a volunteer. All factors regarding the incident(s) will be taken into consideration in determining your suitability or specific assignment. If approved, the misrepresentation of any of this information will result in your termination as a volunteer in The Villages Charter School.
A copy of your driver's license must be submitted and filed with this application.

Have you ever been convicted, found guilty, entered a plea of nolo contendere (no contest), or had adjudication against you other than a minor traffic violation? (DUI is not considered a minor traffic violation and <u>must</u> be listed.) A YES or NO answer is required by Florida Law. You must acknowledge the existence of any criminal or delinquency record regardless of whether the decision was withheld or dismissed by the Court and regardless of whether or not those records have been sealed or expunged. If you check the YES box, you must give complete information for each charge below.

PLEASE CHECK ONE: _____**NO** _____**YES** **(Attach additional pages, if necessary.)**

City Where Arrested	State	Date Arrested	Charges	Disposition
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I understand I am offering my services to The Villages Charter School without compensation. I certify all information given on this application is true and complete. *I understand any misrepresentation, omission, or incorrect statement of fact given by me in this application is cause for my immediate dismissal as a volunteer.* I agree, if I am a volunteer, to abide by all School Board <u>rules</u>, regulations, and policies, either published or in effect by usage, and all rules, regulations, and laws of the State of Florida as may be required by Florida Statutes, the Florida State Board of Education, and The Villages Charter School Board. I understand that I am not covered by worker's compensation insurance or other insurance in connection with my serving as a volunteer and I hereby agree to hold harmless and indemnify The Villages Charter School from and against any injury to my person or property that may arise from my serving as a volunteer.

VOLUNTEER SIGNATURE: _____ **DATE:**_____

The Villages Charter School in considering my volunteer application, may verify the information set forth in this application and obtain additional background information relating to my background. I authorize all persons, schools, companies, corporations, and law enforcement agencies to supply any information concerning my background and driving record if applicable. This includes authorizing the release of information about non-judicial punishment that might have occurred in the Air Force, Army, Navy, Marine, National Guard, or any other branch of the military service. Fees for legal processing of background checks will apply. Volunteers will be notified prior to these fees being assessed.

I have read, understand, and agree to this statement. *(Please initial here)* _____

THE INFORMATION ON THIS APPLICATION BECOMES PUBLIC RECORD UPON RECEIPT: Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status or disability.

TO BE COMPLETED FOR INDIVIDUALS PROVIDING TRANSPORTATION IN PERSONAL VEHICLES

DRIVER'S NAME_____ OWNER'S NAME_____

MAKE_____ MODEL_____YEAR_____ SEATING CAPACITY (with seatbelts) _____ TAG #_____

INSURANCE COMPANY_____ ADDRESS: _____

POLICY NUMBER: _____EXPIRATION DATE: _____

Have you had any traffic violations in the past twelve (12) months? **PLEASE CHECK ONE:** _____**NO** _____**YES**
If yes, please list. _____
_____

I maintain that the above information is correct, that my car is in safe working condition, that I have updated insurance for the driver of the above car, and that my driver's license is valid. (Attach copy of valid driver's license and current insurance card)

DRIVER'S SIGNATURE: _____ DATE: _____