

Volunteer Application

Contact Information	
Name	
Street Address	
City, State Zip Code	
Home Phone	
Work Phone	
E-Mail Address	

Availability	
During which days & hours are you available for volunteer assignments?	
<input type="checkbox"/> Weekday mornings	Monday Tuesday Wednesday Thursday Friday
<input type="checkbox"/> Weekday afternoons	List your available hours _____
<input type="checkbox"/> Weekday evenings	

Interests	
Tell us in which areas you are interested in volunteering	
<input type="checkbox"/> Clerical	
<input type="checkbox"/> Field Trips	
<input type="checkbox"/> Fundraising	
<input type="checkbox"/> Class parties	
<input type="checkbox"/> Library	
<input type="checkbox"/> Cafeteria/Recess	
<input type="checkbox"/> School Events (field day, dances, etc.)	

Special Skills or Qualifications
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

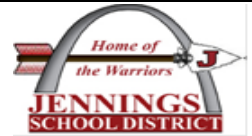
Previous Volunteer Experience	
Summarize your previous volunteer experience.	

Person to Notify in Case of Emergency	
Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature	
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.	
Name (printed)	
Signature	
Date	

Nondiscrimination Clause
It is the policy of the Jennings School District not to discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs or employment practices as required by Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975 and Title II of the Americans with Disabilities Act of 1990.
Inquiries related to District employment practices may be directed to the Jennings School District, Human Resources Director, 2559 Dorwood Drive, Jennings, Missouri 63136; telephone number 314-653-8000. Inquiries related to District programs may be directed to the Jennings School District, Title IX Coordinator, 2559 Dorwood Drive, Jennings, Missouri 63136; telephone number 314-653-8000. Inquiries related to District Section 504 compliance may be directed to the Jennings School District Section 504 Coordinator, 2559 Dorwood Drive, Jennings, Missouri 63136; telephone number 314-653-8000.
Inquiries and complaints may also be directed to the Kansas City Office, Office for Civil Rights, U.S. Department of Education, 8930 Ward Parkway, Suite 2037, Kansas City, MO 64114; telephone: 816-268-0550; FAX: 816-823-1404; TDD: 877-521-2172.





Missouri Fingerprint Background Appointment Form

Name:			
First	MI	Last	Suffix
Alias First Name	Alias Middle Name	Alias Last Name	Alias Suffix
Address:		Apt./Unit	
City:		State:	Zip Code:
Home Phone #	Mobile Phone #	E-mail Address:	
Date of Birth:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Height:	Weight:
Hair Color			
<input type="checkbox"/> Bald <input type="checkbox"/> Black <input type="checkbox"/> Brown <input type="checkbox"/> Gray/Part Gray <input type="checkbox"/> Red/Auburn <input type="checkbox"/> Sandy <input type="checkbox"/> White			
Eye Color			
<input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Hazel <input type="checkbox"/> Maroon <input type="checkbox"/> Pink			
Race			
<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian/Alaskan <input type="checkbox"/> Hispanic			
Place of Birth:	Country of Citizenship:	Social Security Number:	