



Vernonia School District

Volunteer Application / Criminal Background Check

Return completed form to the District Office – 1201 Texas Avenue, Vernonia, OR 97064

Name (print) [First Middle Last]
Social Security # [] Other Last Names Used (maiden) []
Date of Birth [] Driver's License # [] State []
Mailing Address [Address City Zip]
Email Address [] Phone []

Please indicate by checking the appropriate box where you are applying to volunteer.

VES [] VMS [] VHS [] Mist [] UNWC [] Boosters []

COVID Statement: To apply to volunteer with Vernonia School District, please check one of the below boxes.

- I am fully vaccinated and a copy of my vaccination card is attached.
I am not fully vaccinated and have completed page two of this application.

Note: Booster volunteers fall under the Boosters' guidelines and applicants should clarify COVID protocol requirements with them.

Please respond to the following questions:

1. Have you ever been convicted of any crimes which are drug related or related to child abuse?
2. Have you ever been convicted of any crimes related to violence, including abuse prevention?
3. Have you ever been convicted of a major traffic violation, including DUI?
4. Have you ever been convicted of any misdemeanor or felony crimes?
5. Have you ever been arrested for a crime for which there has not yet been an acquittal or dismissal?

If you answered "yes" to any of the above questions, complete the following:

Date of Conviction [] County [] State []
Type of Offense []

Explanation: []

The facts set forth on this form are true and accurate. I understand that false statements on this form shall be considered sufficient cause for non-consideration as a volunteer. By my signature, I authorize Vernonia School District to conduct a criminal and/or civil history records check.

Signature: _____ Date: _____

Approved volunteer status is valid for 3 years. Upon expiration a new application is required to continue to volunteer.

Background Check Completed by: [] Approved [] Not Approved [] Date []
Conviction Matrix Reviewed [] Yes [] No Approved Status Expiration Date []

Vernonia School District
Unvaccinated Volunteer Application Guidelines and Agreement

If you are not fully vaccinated you are required to adhere to the following guidelines in order to be a volunteer with Vernonia School District.

1. **Self-screening for symptoms of illness before arriving to school.** The day you are to volunteer, please conduct a self-screening for any of the following symptoms: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.
2. **Report to the main school office when you arrive at the school to volunteer.** You are required to report that you are symptom-free and able to volunteer. If you are not symptom free, we ask that you stay home. If you do arrive to the school you will be required to show proof of a negative COVID test taken within the previous 72 hours.
3. **COVID Exposure.** I will not volunteer if I have been exposed to someone with a positive COVID test within 5 days of my date to volunteer.

In order to help not spread the COVID 19 virus to students, staff and fellow volunteers, I agree to the above guidelines and agree to follow them accordingly.

Signature of Volunteer Applicant

Date

PRINTED Name of Volunteer Applicant