

SHIPPENSBURG AREA SCHOOL DISTRICT

317 N. Morris Street, Shippensburg PA 17257 717.530.2700 www.shipk12.org

VOLUNTEER APPLICATION FORM - 2024/2025 SCHOOL YEAR

Date	e	Are you a new SASD volunteer?	Yes No
Name		Phone Number	
Add	ress		
Name	e, teacher and g	grade (elementary), or building and grade (secondary), of children	or grandchildren in the District
Child's	Name	Teacher/Building	Grade
For the	Position Vo program, act volunteer co	School year I plan to be a: lunteer — an adult applying for or holding an unpaid positivity or service, as a person responsible for the child's we entact with children. Examples include, but are not limited nes, activity advisor, etc.	lfare or having direct
		• Per Policy #916 the <u>Superintendent or Designee</u> my Volunteers PRIOR TO volunteering. Clearances,	
	who: (1) wo other members but are not le concerts, rea	nteer – an adult who voluntarily provides a service to the orks directly under the supervision and direction of a school er of the school staff; and (2) does not have direct volunteed imited to, volunteering to assist in classroom celebrations, ading to students, collecting tickets at sporting events, world in "Career Day," etc.	l administrator, a teacher or er contact. Examples include, school assemblies, or school
		• Per Policy #916 the <u>Building Principal or Designee</u> Volunteers PRIOR TO volunteering. Clearances, required.	
procedu	res of the Volu	Shippensburg Area School District, I make a commitment to fol unteer Program. I agree that I will be dependable, respectful of in the school community.	Č , 1
Signatı	ire		Date