

BONITA UNIFIED SCHOOL DISTRICT
Volunteer Checklist

Volunteer: _____ Site: _____

- _____ Volunteer Application Completed
- _____ TB Clearance
- _____ Make copies of documents (application and TB test)
- _____ Send original application and copy of TB test to Ronda Schneider at the District office
- _____ Maintain a copy of the volunteer packet in a school site file
- _____ Remind volunteers to sign-in and wear identification

**BONITA UNIFIED SCHOOL DISTRICT
SCHOOL PROGRAM VOLUNTEER
2014-2015**

Volunteers assisting with district programs must complete the School Program Volunteer form:

Name: _____

Address: _____

Telephone: _____
Home Cell

Driver's License #: _____ Expiration Date: _____

As an adult, have you ever been convicted of a felony or misdemeanor, or do you currently have a felony or misdemeanor charge pending? Convictions include a plea of guilty, nolo contendere (no contest) and/or a finding of guilty by a judge or a jury. (Note: *Exclude convictions for marijuana-related offenses more than two years old.*) Yes _____ No _____

If your answer is yes, please explain:

Please identify the school and classroom(s) where you plan to volunteer:

_____ School _____ Classroom(s) – Teacher(s)

Volunteer must provide copy of Mantoux TB test. Expiration Date: _____

PERSONAL LIABILITY

I, _____, am aware that I may be personally liable for my actions/inactions, in conjunction with my volunteer activities. I further realize that I am not an employee or independent contractor of the Bonita Unified School District and I will not be financially compensated for my volunteer activities. I recognize and understand that in performing volunteer service for the District that I am authorized to do so only while in the presence and direct supervision of _____.

Signature/Volunteer Date Signature/Principal Date