

Volunteer Application

School Year:

Applications must be submitted each school year

Legal Full Name: Mr. Mrs. Ms. First, Last			Date of Birth:	
Current Address: Phone Number: Emergency Contact and Phone:	Email Add	ress:		
Do you have a valid photo ID?	☐ Yes ☐ No			
Please attach photocopy of I	D to this application			
Specific program or area of vol	unteer service in whic	h you are inter	ested:	
Non-CCPS Teen One Day/Occasional		Ongoing	Unsupervised Field Trip	
Specifics (Ex: Field Day):				
Names of School-Age Children	Current Grade Lev	<i>r</i> el	School Attending	
Names of School Age emidien	Carrent Grade Lev	701	School Attending	
Have you been charged and/ If "Yes," please explain and g convicted.	•	•		
To the best of my knowledge, a	Il information containe	ed in this applica	ation is complete and accurate.	
Applicant's Signature		Date		
		ccepted as a CCPS	ss depending on one's criminal record. s volunteer. Reach out to hr@ccps.us to	
	OFFICE USI		•••••	
Date Received	Date Reviewed			
Admin Approval		Date		
HR Approval (if needed)		Date		