

AZLE INDEPENDENT SCHOOL DISTRICT
Human Resources Department



VOLUNTEER FORMS

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300 Roe Street
Azle, Texas 76020
(817) 444-2368
FAX (817) 270-2300

This procedure is established in order to create guidelines for checking criminal histories on volunteers that work on district campuses.

Texas Education Code 22.083 states that the District may obtain criminal history record information that relates to a person the District intends to employ, a person that contracts with the district or a person who has indicated, in writing, an intention to serve as a volunteer with the District. Azle ISD policies GKG (Legal) and GKG (Local) establish a volunteer program and define a volunteer as "a person rendering services for or on behalf of the District on District premises or at a school-sponsored or school-related activity on or off school property who does not receive compensation in excess of reimbursement for expenses."

Procedures for criminal history checks of volunteers:

1. The prospective volunteer must complete and sign the Azle ISD School volunteer Criminal History Request forms
2. Forms should be submitted to the campus office secretary who will forward to the Human Resources Department for processing
3. Notification of approval or denial will be forwarded to each campus/department secretary.
4. Volunteer Approval notification will be received through the campus secretary
5. The Texas Department of Public Safety criminal check will be kept on file through the Azle ISD Human Resources

Volunteer Criminal History Form

I am a Volunteer

PLEASE FILL ALL FIELDS OR PROCESSING WILL BE DELAYED

Volunteer Full Name: _____
Last Name First Name Middle Name

Date of Birth: _____ / _____ / _____
Month Day Year

Race: _____ **Sex:** _____
(Male or Female)

Complete Home Address: _____
City, State, Zip

Phone: _____ **Email:** _____

School and Organization where Volunteering: _____

Area Volunteering: _____
Indicate: Band, Choir, teacher helper, name of teacher (if known), etc... do not leave this space blank.

If you have other children attending Azle ISD schools, completion of only one form is necessary. List all schools attending for the current school year on the line above.

By checking the box and signing below, I agree that my electronic signature is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same validity and meaning as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding. This Acknowledgement Form applies to electronic signatures executed for regulatory documents defined under FDA 21 CFR Part 11. By signing below, I accept the conditions of this agreement.

Volunteer Signature: _____ **Date:** _____

PLEASE NOTE: IF ALL INFORMATION PROVIDED BY APPLICANT IS NOT COMPLETED, A CRIMINAL BACKGROUND CHECK CAN NOT AND WILL NOT BE PROCESSED.

