

School District of Mukwonago – Volunteer Application Form (Revised April 2015)

Please fill out, print, sign and return this form to your school

The responsibility the School District has to its school children, program participants and community necessitates the following information from all applicants regarding arrest and conviction records. A record of arrest or conviction does not automatically prohibit volunteer service. It is the policy of the School District to complete this Disclosure Statement. Subsequently, the School District may complete a background check.

- 1) A copy of this application must be completed and on file at each school you wish to volunteer.
- 2) Completed forms will remain on file at each school for the period your child(ren) is/are enrolled.

Last Name: _____	First Name: _____	Middle: _____
Please list any maiden names, nicknames, alias names, or other names you have used including all previous married names and the years used: _____		
Current Address: _____ City: _____ State: ____ Zip: _____ Phone: _____		
Previous Address: _____ City: _____ State: ____ Zip: _____ Phone: _____		
Have you ever lived outside of Wisconsin? YES <input type="radio"/> NO <input type="radio"/> If Yes, Please indicate state(s) _____		
Date of Birth: _____ (mm/dd/yyyy) Gender: Male <input type="radio"/> Female <input type="radio"/>		
Have you ever been convicted of, or do you have any charges pending, for felonies or misdemeanors: NO <input type="radio"/> YES <input type="radio"/> If YES, please describe below and include date, location, nature and circumstance of offense: _____		
Do you have children in the School District? Yes <input type="radio"/> No <input type="radio"/> If so, what school(s) <input type="checkbox"/> 4K <input type="checkbox"/> BBES <input type="checkbox"/> CES <input type="checkbox"/> EVCS <input type="checkbox"/> PVES <input type="checkbox"/> RHES <input type="checkbox"/> SES <input type="checkbox"/> PVMS <input type="checkbox"/> MHS		
Student Legal Name: _____		
In case of Emergency, please contact: _____ Phone No. _____		
I authorize the Mukwonago Area School District to review my personal background. I consent to having the School District conduct a criminal background check. I understand that any misrepresentation on this statement may result in immediate disqualification for any volunteer service within the School District. I understand that the School District will verify the information I have provided above. I understand that the District reserves the right to deny my application to serve as a volunteer. I hereby release the District, its board and its agents, as well as all providers of information, from any liability related to furnishing and receiving information related to arrests and convictions. _____ _____ Signature Date (mm/dd/yy)		
Volunteer Confidentiality Policy		
Confidentiality is a strong consideration in volunteering with the School District. Confidentiality is also a major consideration when individual buildings and classrooms are in need of volunteers.		
Communication of personal and educational information regarding students, parents, staff or associates must be regarded as confidential. Students' academic and medical records, telephone contacts and information about students, families and employees of the district acquired through volunteering must NEVER be communicated beyond the scope of professional and paraprofessional personnel who require such information to work with the students. Questions regarding the practice, policies and types of cases and/or internal problems should be directed to the administrator.		
This policy concerning confidentiality shall emphasize that any infringement will be considered a violation of rules and may lead to immediate discontinuing of volunteer relationship with the School District.		
I have read and understand the above. _____ Signature & Date		

The Mukwonago Area School District complies with the provisions of Title IX, Section 504 of the Rehabilitation Act of 1978, Title VI and VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act and Wisconsin Fair Employment Act; and does not discriminate against students per Section 118.13, Wis. Stats., on the basis of sex, race, color, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, religion, physical, mental, emotional or learning disability or handicap in its educational programs or activities.

The Mukwonago Area School District also prohibits discrimination in employment on the basis of age, race, color, sex, sexual orientation, national origin, ancestry, creed, pregnancy, marital status, religion, handicap, arrest or conviction record or any other reason prohibited by state or federal law. Questions regarding compliance should be addressed to: Maxine Towle, Equal Opportunity Officer, 385 County Road NN E Mukwonago, WI 53149 Tel. No. (262) 363-6300 x24200

Office Use Only:
 Date Checked ____/____/____ Approved State Database Federal Registry
 Checked by: _____ Denied (See attached for explanation) Applicant notified of denial via: _____