



BURBANK UNIFIED SCHOOL DISTRICT

1900 WEST OLIVE AVENUE • BURBANK • CALIFORNIA • 91506
TELEPHONE (818) 729-4418

Are you a current District Employee? Yes No

Date: _____

2017 – 2018 Volunteer Application and Waiver

Name (please print): _____
Last Name First Name Middle Initial

Address: _____
Street City State Zip

Telephone: (Day): _____ (Evening): _____

I am seeking a position as a volunteer for the following activity: _____

At the following school: _____

My child's name is: _____, his/her teacher is _____

Please answer the following questions:

1. Do you have a valid California Driver's License or California Identification Card? Yes No
CDL# _____ Expiration Date: _____

COPY OF A VALID CALIFORNIA DRIVER'S LICENSE OR IDENTIFICATION CARD MUST BE ATTACHED

2. Have you ever been convicted of a crime involving a minor? Yes No
If yes, explain in detail: _____

3. Have you ever been convicted of a sex offense or felony involving controlled substances? Yes No
If yes, explain in detail: _____

4. Have you ever been convicted of any crime? Yes No

For purposes of this question, a "conviction" does not refer to any conviction of a juvenile offense for which the record had been judicially sealed or expunged; and misdemeanor conviction for which probation has successfully been completed and the case dismissed; or any conviction involving marijuana which is over two (2) years old. The existence of a criminal record does not constitute an automatic bar to being a volunteer.

If yes, explain in detail: _____

Give names and addresses of three (3) references, not relatives or former employers:

Name: _____ Telephone: () _____ - _____
Address: _____ Occupation: _____

Name: _____ Telephone: () _____ - _____
Address: _____ Occupation: _____

Name: _____ Telephone: () _____ - _____
Address: _____ Occupation: _____

I understand that if I am going to be a volunteer driver for any students, other than my own children, on any District-approved field trip or to any school-related activity, I must receive prior written permission from the site Principal and I must provide proof of liability insurance in the amount of at least \$100,000.00 per occurrence.

While acting in the capacity of a Burbank Unified School District volunteer, I understand that I must wear proper site and/or District identification in accordance with District regulations. It is understood that without this identification I may be asked to vacate the premises.

Waiver

To ensure the safety of our students, staff and all persons involved in the learning process, Burbank Unified School District may conduct a background check of volunteers.

By signing this waiver, I acknowledge this requirement and permit the District to access State-maintained criminal history records and Department of Motor Vehicle information. It is understood that this information will be held in the strictest confidence and may not be used for any other purposes.

Signature

Date

CERTIFICATE OF APPLICANT: I certify that all statements made on this application are true and complete to the best of my knowledge. I understand that any false statements or incomplete information will subject me to disqualification or dismissal as a volunteer for the Burbank Unified School District.

Signature

Date

The Burbank Unified School District is committed to equal opportunity for all individuals in education. District programs and activities shall be free from discrimination based on ***disability, gender, gender identity, gender expression, genetic information, nationality, race or ethnicity, religion, sexual orientation, or association with a person or group with one or more of these actual or perceived characteristics.***