

# Union County Schools Volunteer

## Return Forms To:

Kristin Collins, Parent Engagement Coordinator or  
Primary, Elementary or Middle School Front Office

### **Contact Information**

Please provide the following information to assist us in scheduling your volunteer time. Your contact information will be utilized to contact you throughout the year. Your contact information will only be shared with: district employees who may need the information in order to do their jobs, appropriate people in an emergency, and/or committee representatives as needed by event coordinators.

Last Name \_\_\_\_\_ First \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Contact me at (\_\_\_\_) \_\_\_\_\_ Secondary Number(\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Emergency Contact \_\_\_\_\_  
Phone # \_\_\_\_\_

Have you ever been convicted or are there any criminal charges pending of any felony, sex offense, or controlled substance offense, including entering a plea of nolo contendere, in Georgia or in any other state or place? No \_\_\_\_\_ Yes please explain  
\_\_\_\_\_

In order to thoroughly review your background, it is necessary to know where you have lived in the past five years. **Please list all addresses you have held for the past five years.**

Address: \_\_\_\_\_ Dates: \_\_\_\_\_

Address: \_\_\_\_\_ Dates: \_\_\_\_\_

Address: \_\_\_\_\_ Dates: \_\_\_\_\_

**Scheduling Information:** Please List School Aged Children

Name	Grade	Teacher
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Indicate Your Availability**

<b>Day(s)</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>At Home Projects</b>
<b>Time(s)</b>						

**UCS Process**

Our children are our most important resources. We each have a personal responsibility to do our best to provide a safe environment with numerous educational opportunities for them to take part in. As parents, grandparents, neighbors, and members of our community you have talents, skills, ideas and time that you can share with our school and our students that helps us work towards providing these opportunities.

Safety is our top priority, so anyone interested in volunteering may be subject to complete a background check and/or fingerprinting process before being allowed to volunteer. At this time, the fee for background check is \$10 and the fee for fingerprinting is \$50. The fees associated with these processes are to be the expense of the volunteer. However, if you have financial concerns, please contact Kristin Collins at the Primary School (706) 745-5450 ext. 5152 or [kcollins@ucschools.org](mailto:kcollins@ucschools.org). All volunteers must update information annually.

At your initial meeting, you and I will review some required basic paperwork, review the following questions and get you on the calendar to begin helping out at Union County Schools.

Please share the ways you would like to help at UCS: \_\_\_\_\_  
\_\_\_\_\_

Please **Circle** any of the following that you would **NOT** want to do:

- |                       |                |                         |
|-----------------------|----------------|-------------------------|
| Laminating            | Copy machine   | Decorate room/door      |
| Cutting out materials | Work 1 to 1    | Read to Children        |
| Help with math        | Birthday Board | Listen to children read |
| Holiday parties       | Crafts         |                         |

Other: \_\_\_\_\_

The Parent Engagement Coordinator will be assigning volunteers based on various factors of need. Sometimes that may be in a specific classroom or by the grade level. We strive to meet the needs presented of both the teachers and students for the good of the school. Thank you for your desire to help our students and staff.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**