



Mason
County WV Schools

Volunteer Service Request Form

School :		Date:
First Name:	Middle Name:	Last Name:
Address:		Phone:
Parent or Guardian Of:		
If other list affiliation: (ex. Grandmother of John Smith)		
Background/Sexual Offense Check:		
<input type="checkbox"/> I have <i>not</i> been convicted of or pleaded guilty to a crime;		
<input type="checkbox"/> I have been convicted of or pleaded guilty to a crime please disclose all information: (do not include speeding or traffic violations)		
Volunteer Understanding:		
<input type="checkbox"/> I understand that this does not constitute a contract of employment; the Volunteer's services are rendered consistent with, and by virtue of, the volunteer program sponsored by Mason County Board of Education, with the stipulation that the Volunteer be under the direct supervision of a board employee at all times while performing the duties; that the services are gratuitous to the benefit of the public schools of Mason County, West Virginia; that the Board has made no promise or agreement what-so-ever, expressed or implied, the Volunteer expressly covenants that he/she will make no claims against the Board for their services to that said school system.		
<input type="checkbox"/> I understand that I am required to abide by all Board policies and County guidelines while on duty as a volunteer; I will be covered under the County's liability policy but the County can not provide any type of health insurance to cover illness or accident incurred while service as a volunteer, nor am I eligible for worker's compensation.		
<input type="checkbox"/> I understand that this request must be approved by the board and is at the sole discretion of the Superintendent, he/she may determine that my presence as a volunteer in the schools would present an unreasonable risk to the safety and welfare of students and may be informed that I may not serve as a volunteer. If I engage in behavior in violation of policies, written or oral instructions by school personnel, or engage in any behavior that is adverse to student safety or welfare, the Superintendent, in his/her sole discretion, may determine to discontinue my service as a volunteer.		
<input type="checkbox"/> I agree to hold confidential, the privacy rights of students, staff, and parents within the school community.		
<i>I have read and understand everything on this form. My signature shows my acceptance to all items on this form.</i>		
Volunteer Signature		Date