

JENNINGS COUNTY SCHOOL CORPORATION
MAIN STREET
NORTH VERNON, IN 47265
(812) 346-4483

VOLUNTEER APPLICATION

Date of Application _____

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age material or veteran status, or the presence of a non-job-related medical condition or handicap.

Name of child _____ Teacher _____

School _____

Part A

Please check the assignments(s) for which you want to volunteer.

☐ classroom* ☐ coach* ☐ office* ☐ library*
☐ technology* ☐ clubs ☐ lunch room ☐ clean-up
☐ supervision ☐ field trips ☐ room parent ☐ dance

If you checked one of the following assignments: classroom, coach, office, library, or technology, you are required to complete Part B of the JCSC Volunteer Application.

Last Name (Maiden Name) First Name M/I

Address City State Zip Code

Home Phone: _____ Work Phone: _____ Cell Phone _____

E-mail _____ Driver's License # _____

Social Security Number _____ (optional)

Emergency Contact: Name _____ Phone _____

It is understood and agreed upon that any misrepresentation by me in the application will be sufficient cause for cancellation of this application and/or separation from the JCSC volunteer program. All volunteers of the JCSC are subject to a criminal history/sex offender background check; therefore, they will be expected to provide JCSC with their date of birth and a copy of driver's license for the purpose of conducting the criminal history background check.

Date Volunteer's Signature Date of Birth