

**WALNUT VALLEY UNIFIED SCHOOL DISTRICT  
VOLUNTEER ASSISTANCE APPLICATION**

Applicant's Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (Zip)

( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Phone Cell Phone Work Phone

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Height) (Weight) (Hair Color) (Eye Color) (Male/Female)

Driver License/ID#: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Do you have a child or children currently enrolled in this school district? \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
(Name of School) (Student) (Room# or Teacher)

\_\_\_\_\_  
(Name of School) (Student) (Room# or Teacher)

\_\_\_\_\_  
(Name of School) (Student) (Room# or Teacher)

Emergency Contact:

\_\_\_\_\_  
(Name) (Daytime Phone) (Evening Phone)

Have you ever been convicted of a felony or misdemeanor (except for juvenile convictions?) \_\_\_\_ Yes \_\_\_\_ No

If yes, explain in full detail (add additional pages as necessary)

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Level: \_\_\_\_\_ Approval: \_\_\_\_\_ Cleared: \_\_\_\_\_ Date: \_\_\_\_\_

# **WALNUT VALLEY UNIFIED SCHOOL DISTRICT**

## **VOLUNTEER'S STATEMENT OF COMMITMENT AND RESPONSIBILITIES**

As a Volunteer on a Walnut Valley Unified School District campus, I agree to:

- Attend orientation or training sessions necessary for my assignment
- Keep school and student information confidential
- Abide by all school rules and Board regulations

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Volunteer Signature

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Date