

## **Bethel Christian Schools**

2425 Van Buren Blvd. Riverside CA 92503 • (951) 359-1123 • BethelChristianSchools.com

| Faculty       |  |
|---------------|--|
| Principal     |  |
| Administrator |  |

For office use only

## **Application - School Volunteer**

| Personal Information  |                             |                         |      |
|---|-----------------------------|-------------------------|------|
| Name  |                             | Date                    |      |
| Address   |                             |                         |      |
| Telephone ()  | ()                          |                         |      |
| Are you related to a student enrolled in Bethel Christi<br>If so, please list the name a grade of the student and |                             |                         | □ No |
| Student Name  | Grade                       | Relationship to Student |      |
| Student Name  | Grade                       | Relationship to Student |      |
| Student Name  | Grade                       | Relationship to Student |      |
| Student Name  | Grade                       | Relationship to Student |      |
| Name of Health Insurance Company  |                             | Policy #                |      |
| Have you ever applied to volunteer here before?   |                             | □ Yes                   | □ No |
| If yes, what school year?   | _ Drivers License           | #                       |      |
| Do you have a Commercial Passenger Transportation   | Endorsement                 | □ Yes                   | □ No |
| Have you ever been convicted of a crime?  |                             | □ Yes                   | □ No |
| If yes, please explain in full:   |                             |                         |      |
|   |                             |                         |      |
| For what type of work are you volunteering?   |                             |                         |      |
| ☐ Classroom Help ☐ Field Trip Chaperone   |                             |                         |      |
| ☐ Other   |                             |                         |      |
| What experience or training do you have related to the  | he type of work for which y | ou are volunteering?    |      |
|   |                             |                         |      |

## References

Please list the name, address and telephone number of three (3) or four (4) personal references who are not related to you

| Name | - 0500 08500 4500 5(K) 5. | Address |     | Telephone |
|------|---------------------------|---------|-----|-----------|
|      | Street                    |         |     |           |
|      | City                      | State   | Zip |           |
|      | Street                    |         |     |           |
|      | City                      | State   | Zip |           |
|      | Street                    |         |     | -         |
|      | City                      | State   | Zip |           |
|      | Street                    |         |     |           |
|      | City                      | State   | Zip |           |

## Professional, Trade, Business or Civic Associations

Please exclude those which may disclose your sex, race, color, age, national origin, disability or other protected status

| Organization | Office(s) Held |
|--------------|----------------|
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| 1000         |                |
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|              |                |

While on campus or in the presence of students I agree to refrain from activities that are deemed inappropriate, such as the use of or being under the influence of alcohol or illicit drugs, the use of tobacco, or the use of vulgar or profane language.

I hereby affirm that I have never been involved in sexual abuse or impropriaties toward a minor as defined by Scripture and California State Law, nor do I have any inclinations toward such behavior.

I hereby declare that the information given herein is true and complete to the best of my knowledge. Further, I give Bethel Christian Center the right to verify all information contained in this application and release from liability Bethel and its representatives for seeking such information.

I understand that for the safety and welfare of the children, Bethel requires all persons who work with, provide care or supervision for, or have direct contact with minors (children under the age of 18 years) to submit to a fingerprint check by the State of California and the Federal Bureau of Investigation.

| Further, I understand that as a volunteer I will not | be compensated in any way for my services |
|--|---|
|--|---|

| Signature of Applicant | Date |  |
|------------------------|------|--|
| Signature of Applicant | Date |  |