



Educational Services & Human Resources Divisions
 1515 West Mission Road
 Alhambra, CA 91803

AUSD Volunteer Registration Form

Date: _____

School/Location: _____

(Oct 2012, Rev. Aug. 12, 2013)

First Name (Please PRINT)	Middle Initial	Last Name	Gender (Circle one) Male Female	Address: (Number/Street) (Apartment) (City) (Zip Code)	Home Phone:
In case of an EMERGENCY please contact: Name: _____ Phone Number: _____ Relationship: _____			Two References (Non-related) (1) Name: _____ Phone: _____ (2) Name: _____ Phone: _____ <i>OPTIONAL</i> (References checked by _____, date ____)		Children Currently Attending AUSD: Name(s) Grade Room _____ _____ _____ _____
Placement Preferences – Days and times available			Program(s) – Circle all applicable areas: Pre-School Kindergarten Elem(1-3) Elem(4-6) Elem(6-8) HS(9-12) Adults Afterschool Other: _____		Subject(s) Reading Math Science Soc-Science Other: _____
Mon	Tue	Wed	Thu	Fri	(Other)
Educational Background (Circle one): HS Some College A.A. B.A./B.S. M.A./M.S. Ed.D./Ph.D. Other: _____ Previous volunteer experience:			Fluency in Language(s) – Other than English: Language(s) Speak Read Write _____ _____ _____		

Thank you for your willingness to volunteer to help our students. To ensure the safety of students, the Board of Education of the Alhambra Unified School District requires *all* volunteers to comply with Board Policy (BP1240) and Administrative Regulation (AR1240). Please read and initial the following statements:

(1) The Alhambra Unified School District believes every student should be able to enter a learning environment free from crime, violence, drugs and abuse. The District reserves the rights to screen volunteer applications for any record of criminal history.	<i>Initial</i>
(2) I understand school volunteers are required to sign-in and out each day and to have current and satisfactory T.B. test result before starting volunteer service. A copy of my T.B. test results will be provided to the school/district office as soon as possible.	<i>Initial</i>
(3) I certify under penalty and perjury and in conformance with Ed. Code Section 35021 that I have not been required to register as a sex offender pursuant to Penal Code Sections 290 and 290.4.	<i>Initial</i>

Volunteer Signature: _____ Date: _____

For School/District Use Only

School Verification				
Activities	Date	Verified by (Name/Initial)	Copies on file	Principal's (or Designee's) Signature/Initial
T.B. Clearance				
Fingerprint Clearance				
Educational Level (circle one) HS AA BA/S MA/S EdD/PhD				

Assignment/Placement Notes

