

Vance County Schools

School/Volunteer Agreement:

Name of School Where Volunteering: _____

As a parent/guardian of a student in Vance County Schools or as a community member, I understand the importance of parental and community support and involvement in our schools.

In doing my part to be involved in the educational process, I agree to volunteer in some capacity for the school. I further agree to offer at least one hour of my time per month to volunteer in activities for the school throughout the school year.

All information will be kept confidential. Individuals should report any transgressions to school officials.
Please print all information.

First Name	Middle	Last	Maiden	Social Security Number
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Address	City/State	Zip
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Phone Number	Date of Birth	Male or Female
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If Parent, Name of Child(ren) _____

Signature of Volunteer	Date
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Have you been a N.C. resident for the last 5 years? Yes No

Background checks will be conducted on all school volunteers who work directly with students and may be unsupervised by school system employees.

As a principal in Vance County Schools, I understand the importance of parental and community support and involvement in our schools.

In doing my part to offer our students the best possible educational experience, I agree to work with our school volunteers to offer them support and use their unique talents to enrich our students' education.

Signature of School Principal	Date
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Schools must send a copy of this form to the Human Resource Department.