



## VOLUNTEER APPLICATION CHECKLIST

- All three (3) Volunteer Application pages are filled out completely
- Attached a copy of your Tuberculous Test Result with your name, medical provider information and date of test. The test must have been taken within 4 years
- OR
- California School Employee Tuberculosis (TB) Risk Assessment Questionnaire (for pre-K, K-12 schools and community college employees, volunteers and contractors) form pages 1 and 3 and must be stamped or signed of my medical provider
- Return to School Secretary or assigned staff for Principal Signature
- High School Student volunteers** must include their class syllabus or volunteer flyer or Teacher Letter with details of their requirements. Volunteer Form can be signed by the student or their Parents/Guardians.

## VOLUNTEER APPLICATION RESOURCES

### Berryessa Union School District Live Scan (fingerprinting) Services

**Our Live Scan program is by appointment only.** We do not offer drop-ins. Please sign up for an appointment here: <https://bit.ly/BUSDFingerprinting>

#### **What do I need to bring with me for Live Scan Fingerprinting?**

A government-issued photo ID. The ID must be valid and unexpired to be the primary valid identification. Acceptable IDs include a driver's license, state ID, passport, military ID, and green card.

#### **How much does it cost?**

\$40 cash/check made to: Berryessa Union School District or \$42 by credit card for DOJ fees and for all other types of Live Scans please contact our Human Resources Department at 408-923-1850.

**Overall, applicants must bring a valid government-issued photo ID, and payment to ensure a hassle-free experience. The Live Scan form will be provided during the appointment.**

### Tuberculosis Screening Information

Tuberculous Screening is required for all volunteers.

- **Reach out to your Medical Provider**



- **Community Clinics Locator:**

<https://publichealth.sccgov.org/sites/g/files/exjcpb916/files/documents/Community-Clinics-List-October-2023.pdf>



- **California School Employee Tuberculosis (TB) Risk Assessment Questionnaire Form:**

<https://publichealth.sccgov.org/disease-information/information-about-tuberculosis-tb#1849274314-3077506034>



School

School Year

# VOLUNTEER APPLICATION

## YOUR CONTACT INFORMATION (LEGAL NAME ONLY)

First Name  Last Name

Alias/Maiden Name(s)

Address

City/State  Zip Code

Phone  Email

Are you currently a Berryessa Union School District regular or substitute employee?

No, proceed with form  Yes, stop here, sign below, and fill out HR-10B and HR-10C

California Driver's License Number  Birthday (MM/DD/YY)

Have you done a Live Scan with our District?  Yes  No

If no, and you would like to be contacted about scheduling a fingerprinting appointment for expedited application processing, please check here

Do you have a child or children in the school?  Yes  No

My child or children's name(s) and grade(s) are:

Child or children's teacher(s):

Brief description of service to be performed: High School Name (student volunteers only)

Days of Service:  Monday  Tuesday  Wednesday  Thursday  Friday  Others – Explain:

Date of Service from:  to  Times  am/pm to  am/pm

Location where service is to be performed:

**NOTICE: A person who is required to register as a sex offender shall not serve as a volunteer.**

I have completed the above information truthfully and have read, understand, and will comply with district requirements and expectations for all volunteers. I authorize the Berryessa Union School District to conduct a criminal background check of school volunteers as permitted by law.

Signature

Date

### SCHOOL STAFF ONLY

TB Clearance (volunteer's name, test date, OR  TB Risk Assessment Form medical provider info, within 4 years) Page 1 & 3

All 3 forms are complete signed and dated

Principal's Signature & Date

### HUMAN RESOURCES ONLY

Been Verified OR  Live Scan Required  Email Called  ATI:

Incomplete Form:

Human Resources Approval & Date



## EXPECTATION AND REQUIREMENTS FOR VOLUNTEERS

1. The Governing Board encourages parents/guardians and other members of the community to share their time, knowledge, and abilities with our students.
2. To insure the safety and well-being of our children, Berryessa Union School District has developed several expectations and requirements for all our volunteers. Safety is our first concern.
3. Each volunteer is required to complete the District Volunteer Application Form, and the completed form must be on file in the principal's office and the District's HR department prior to commencement of service. This form includes a requirement to disclose any prior criminal convictions. If you fail to provide accurate information, your service as a volunteer will be terminated.
4. Proof of TB clearance (testing up-to-date) or evidence of the Adult TB Risk Assessment Questionnaire must be provided to the school/department. TB testing or risk assessment is at the expense of the volunteer. (Board Policy Regulation 1240, Education Code 49406)
5. Each volunteer is expected to maintain confidentiality regarding each student and family.
6. If volunteers hear about or observe evidence of child abuse, volunteers shall report the information to the site principal or designee immediately.
7. Education Code 35021 provides that a person who is required to register as a sex offender pursuant to Penal Code section 290 shall not serve as a volunteer.
8. Registered sex offenders cannot serve as chaperones for field trips or other school activities.
9. If no criminal background check or fingerprinting has been completed and reviewed, the volunteer will not be allowed to work with children.
10. Volunteers understand that service activities to be performed are determined by the administrator and/or teacher and may be discontinued at any time.
11. Proof of COVID-19 vaccination is optional.

**I have read and understand the information above. I agree to follow these guidelines.**

**Print Legal Name**

**Signature**

**Date**



# CRIMINAL HISTORY DECLARATION FOR VOLUNTEERING AT SCHOOL

The Berryessa Union School District wants to encourage parents and others to volunteer their time and service to the District and our children. The donation of your time is greatly appreciated. The District also desires to ensure a safe school environment for our children. In order to accomplish this objective, it is necessary to prevent those individuals, who are registered as sex offenders, who have been convicted of a violent felony or has some other inappropriate criminal conviction, from volunteering in our schools.

Education Code Sections 35021 and 35021.1 prohibits persons who are required to register as sex offenders under Penal Code Section 290 from volunteering in public schools. Penal Code Section 290.95 requires all persons who are required to register as sex offenders to report such status when applying for or accepting a volunteer position in schools.

**Are you a registered sex offender?**

Yes  No

**Have you ever been convicted of any felony or misdemeanor?**

Yes  No

**Have you ever been convicted of a felony or misdemeanor for any drug offense?**

Yes  No

**Have you ever been convicted of a felony or misdemeanor for any violent offense?**

Yes  No

**Have you ever been convicted of a felony or misdemeanor for any sexual offense?**

Yes  No

**Have you ever been disciplined in your employment, arrested or involved in a situation in which your conduct was questionable as it relates to children?**

Yes  No

**IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE ATTACH AN EXPLANATION OF THE NATURE, DATE, LOCATION, AND DISPOSITION OF THE CASE(S), RELATED TO THE CONVICTION.**

*I declare under penalty of perjury under the laws of the State of California that I have not been convicted of a crime that requires me to register as a sex offender, and if I am, subsequent to this date, convicted of such a crime, I agree to immediately notify the Berryessa Union School District of such conviction. I further understand that if the information I have provided is not accurate, my volunteer services will be terminated.*

Executed on  at , California.  
Date City

Print Name

Signature