

VOLUNTEER INFORMATION SHEET for _____
print name

Requirements:	Office Use Only Date rec'd
_____ Photo ID	_____
_____ Live Scan-School Volunteer Form	_____
_____ TB (Tuberculosis) Test	_____

Parent volunteers shall sign and file this information sheet, including above requirements, with the school principal before volunteering at DECS. This includes, but is not limited to: parents volunteering in the classroom, field trip chaperones, event volunteers, cafeteria/playground supervisors, drivers, coaches and student mentors.

 Full legal name (Last, First, Middle)

 Street Address City, State, ZIP

 Daytime phone

 Email address

Gender: Male Female

 Birthdate

 Student name

 Relationship to Student

 Volunteer Signature

 Date

DECS APPROVAL SIGNATURE _____ <input type="checkbox"/> Copy to teacher _____	**OFFICE USE ONLY** Date _____
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