

NORTHPORT SCHOOL DEPARTMENT

56 Bayside Road
Northport, Maine 04849
207-338-3430

SCHOOL VOLUNTEER APPLICATION

Edna Drinkwater School welcomes you as a volunteer. In order to ensure that your participation is effective, we need some information from you.

Please complete the information below and return it to the school office.

Name _____ Telephone _____

Mailing Address: _____

Town/City of Residence _____

Can you please tell us why you wish to volunteer in our school? _____

Please sign below acknowledging that you have read, understand, and agree to comply with the following guidelines regarding volunteers in our schools.

1. Volunteers must check in at the office or with the volunteer facilitator for each visit.
2. Students may not be taken out of the school building without permission from the principal or facilitator.
3. Students may not be taken off school property without written parental permission and permission from the school principal or facilitator
4. Individuals who are under the influence of alcohol and/or drugs may not be on school property.
5. State law does not allow individuals, other than law enforcement personnel, to have firearms on school property.
6. Edna Drinkwater School and grounds are tobacco free.

NORTHPORT SCHOOL DEPARTMENT

56 Bayside Road
Northport, Maine 04849
207-338-3430
Fax: 207-338-5985

CONFIDENTIAL

Authorization for Volunteer Background Checks

State Bureau of Identification

I, _____ give permission to obtain a report of any criminal convictions on my record from the State Bureau of Identification.

I understand that failure to authorize this record check may disqualify me from consideration for volunteering with the Northport School Department.

Signature Date

Print Full Legal Name Date of Birth

Street Address City, State, Zip Code

Social Security Number

All other names known by (maiden name, previous married name etc.)

Please list all states where you have resided in the last ten (10) years.
