

Volunteer Letter of Intent

Please write legibly:

		e legibly.				
Social Security Number			Date of Birth		(used for background check)	
Last Name			First Name	Middle Initial		
Phone			Address	City		
State	e	ZipEmail	Vc	olunteer School(s)		
Nam	ne of chil	d/grandchild attending sch	ool, if applicable			
volu som	nteer in eone wh lber one	our schools. A volunteer is no plans to supervise or ch a	of Scott County Schools, I want defined as someone who plans aperone students other than the aintain that safety, I am asking y	to come into the schools on a eir own . As you can imagine,	a regularly scheduled basis or the safety of our students is my	
1.	Answe	er the Character & Fitness o	uestions listed below.			
2.	. Review the Confidentiality Overview.					
3.	Sign a	nd date this form in the box	t below.			
		Answer the questions by ci	CHARACTER & FITNES		itten explanation.)	
YES	NO	Have you ever been con	ve you ever been convicted of a felony?			
YES	NO		peen convicted of a misdemeanor involving a student or minor?			
YES	NO		victed of a misdemeanor involvi	=		
			f public office, disorderly conduc		s or pornography?	
YES	NO	•	al contact with a student or mind			
YES	NO		committed any act that constitutes fraudulent, corrupt, or immoral conduct?			
YES	NO		demonstrated willful/careless disregard for the health, welfare or safety of others?			
YES	NO	Have you ever possessed duties?	d or been under the influence of	f drugs/alcohol during the perf	formance of	
			CONFIDENTIALITY	OVERVIEW		
By si	igning be	elow, I agree to the followir	ng contract made between myse	If and the Scott County Schoo	ls:	
	ava	ilable to the general public				
	witl	h through the Scott County			•	
	3. I ple	euge to keep any information	on passed on to me about stude	ints in the Scott County School	s connuential.	
Sincerely,						
/_	111. R	l				

Volunteer Signature

Date

Mr. Billy Parker, Superintendent