

William S. Hart Union High School District

Fingerprint Request Form

This form to be utilized for Category 2 volunteers.

Unpaid Volunteer/Coach/Chaperone/Advis	sor	Administra	ator Approval:	_
School: Saugus High School	Program:	Cheer	Date:	_
Employee/Volunteer Name:				
Home Address:				
City, State, Zip Code:				
Home Telephone :		Cell Phone	2:	_
	lescribed abov		paid coach or advisor or District/ASB/Bood prior to July 9, 2010 MUST be re-cleared	
The district processing fee is \$60.00 for finite is responsible for payment, it MUST be confingerprinting/volunteer clearance. School	ollected at the	school site prior		r
Volunteer Applicant Information:				
be scheduled by calling (661) 259 - 0033,	ext. 417. If a will not be ac	volunteer applice cepted and the a	applicant will not be fingerprinted. The	
The forms and/or training needed to apply	as a voluntee	er are located on the	he District website at	
	www.hartd	istrict.org/volunt	teer/	
All Category 2 volunteer applican	its will need to	o bring the follow	ring items:	
Fingerprint Request Form/Vo Medical Treatment Authoriza TB Test Result Certificate of completion of the	tion Form/Em	nergency Contact	Information	
Driver applicants will need to brin	ng the following	ng additional item	as:	
Driver Application Copy of CA Driver License Proof of automobile insurance A signed copy of the Driver C A signed copy of the Distracte	Guidelines	mo		
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William S. Hart Union High School District

The designated school administrator will be notified when a volunteer applicant is approved or disqualified. The approval process will take approximately 90 days. Volunteers will be approved through June of their student's graduation year or for five years if they are not a parent or guardian of a student in the District. Approved volunteers will be issued District photo identification cards after being cleared. ID cards will be sent to the fingerprinting administrator at the school.

TB testing may be completed by the applicant's personal physician, Samuel Dixon Clinics located in Val Verde, Newhall and Canyon Country; or US Healthworks in Saugus.

Waiver

To ensure the safety of our students, staff and all persons involved in the learning process, the William S. Hart Union High School District conducts a background clearance of volunteers and a DMV clearance of volunteer drivers. By signing this application, I acknowledge this requirement and permit the District to access my State and Federal criminal history records and my DMV information and records. It is understood that this information will be held in the strictest confidence and may not be used for any other purpose.

I certify that all of the statements made on this application and the other related application documents are true and complete to the best of my knowledge. I understand that any false statements or incomplete information will subject me to disqualification or release as a volunteer for the William S. Hart Union High School District.

While acting in the capacity of a William S. Hart Union High School District volunteer, I understand that I must wear proper site and/or District identification in accordance with District regulations. I also understand that without this identification I may be asked to leave an activity or school/district property.

Applicant Signature:	 Date: