

# IJOC-E2 - Levels 2 & 3

# Volunteer Application Form

**M.S.A.D. #35**

**Superintendent of Schools' Office**

**180 Depot Road, Eliot, ME 03903**

THE FOLLOWING INFORMATION IS REQUESTED TO HELP US COORDINATE VOLUNTEER SERVICES  
AND TO ENSURE STUDENT SAFETY.

**Full Name:** \_\_\_\_\_

**All former names (maiden, married, and any alias used):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

**Telephone and Email:** \_\_\_\_\_

**Date of birth (required for background check):** \_\_\_\_\_

**Schools in which you will be volunteering:**

Eliot Elementary    Central School    MGWS    MMS    MHS

Area(s) of interest for volunteering:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Children in [name of school] (names and grades):

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List any education, training, or experiences you have had which would help us in meeting the needs of our students:

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References: List three persons who can comment on your character and abilities whom we may contact.

Name/Address-----Phone-----Relationship

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**BACKGROUND:**

The following information is asked of all individuals who volunteer to work with our children to help ensure the safety of our students.

Have you ever been charged with or investigated for sexual abuse or harassment of another person? Yes\_\_ No\_\_

Have you ever been convicted of a crime (other than minor traffic offense)? Yes\_\_ No\_\_

Have you ever entered a plea of guilty or "no contest" (nolo contendere) to any crime (other than a minor traffic offense)? Yes\_\_ No\_\_

Has any court ever deferred, filed or dismissed proceedings without a finding of guilty and required that you pay a fine, penalty or court costs and/or imposed a requirement as to your behavior or conduct for a period of time in connection with any crime (other than a minor traffic offense)?  
Yes\_\_ No\_\_

If you answered YES to any of the previous questions, provide full details below, including with respect to court actions, the date, offense in question, and the address of the court involved (attach additional page(s) if necessary).

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If you have lived outside of Maine, please identify the states and dates:

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Refusal to provide authorization for reference and/or criminal records checks and/or providing false or misleading information on this registration shall constitute sufficient reason to deny approval to serve as a volunteer or termination as a volunteer in the MSAD 35 district.

I understand that MSAD 35 performs reference and criminal records checks on all volunteers and I authorize persons and entities contacted by the School Department in connection with this application to provide information about me. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school department, its agents and officials or against any provider of such information. I further understand that if I am approved as a volunteer, that I will be required to sign a Volunteer Agreement and attend a Volunteer Orientation.

I understand that as a volunteer in MSAD 35 that ALL student and staff information is confidential. I agree not to access, review, disclose or use confidential student or staff information without specific authorization from a school administrator. I also understand that even when I am no longer a volunteer in the schools, any confidential information I have learned must continue to be kept confidential. I understand that any breach of these confidentiality requirements will result in my immediate termination as a volunteer and may result in legal action against me.

I understand that I must comply with all Board policies and school rules applicable to school staff as well as all directions from school administrators and staff while serving as a volunteer. I further understand that my authorization to serve as a volunteer may be terminated at the discretion of the Superintendent and school principal at any time if they determine it is in the best interests of the students of MSAD 35.

Signature of Volunteer: \_\_\_\_\_ Date:  
\_\_\_\_\_

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**DISTRICT USE ONLY - PLEASE DATE AND INITIAL APPROVALS BELOW**

Volunteer Application Form approved by Principal or Athletic Director:

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Form reviewed for completeness and references checked by Principal or Athletic Director:

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Local report - Maine State Police Criminal History Check and Sex Offender Registry Check done by Superintendents' Office and approved by

Superintendents' Office:

\_\_\_\_\_

Maine Fingerprinting appointment confirmed (required for Level 3 only):

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Maine Department of Education Initial Approval Form submitted through MDOE Portal (required for Level 3 only):

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*(Application Form Revised November 15, 2023)*

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