

## SOUTH BEND COMMUNITY SCHOOL CORPORATION

215 SOUTH ST. JOSEPH STREET SOUTH BEND, INDIANA 46601 TELEPHONE (574) 283-8000

## VOLUNTEER APPLICATION FORM CONSENT TO CRIMINAL HISTORY BACKGROUND CHECK

## PLEASE PRINT CLEARLY AND COMPLETE ALL FIELDS:

List each of the school(s) at which	ch you would like to volunteer <i>(r</i>	required):	
(1)	(4)		
(2)	(5)	(5)	
(3)	(6)		
Last Name: (Please print)	First Name:	MI:	
List all other names you have us	ed including maiden name:		
Date of Birth (mo/day/year):	/ / SSN#:		
Current Address:	, , , , , , , , , , , , , , , , , , , ,		
☐ Male ☐ Female ☐	White □ Black □ Multi Race	e 🗆 Hispanic	
$\square$ American Indian/Alaskan $\square$	Asian/Pacific Islander 🛛 Unkn	own	
		_	
Email Address:	Telephone Number: ndicate the reason(s) for volunteering:		
* Employer/Organization Repre (REQUIRED if Corporate/Organization Volunteer is Address:			
Email Address:	Telephone Num	ıber:	
I certify that the information contains accurate to the best of my knowledge part of my application to provide volunderstand that I am required to scondition for consideration of volu and agree to abide by the rules and g the South Bend Community School (	e. I understand that falsification of in unteer services will be cause for my ubmit to a criminal history backgr nteer services. If I am accepted as a uidelines of the Board of School Tru Corporation is not responsible for any	s true, complete and formation submitted as disqualification. I also round check as a volunteer, I understand astees. I understand that	
or my person while I am acting as a			
Applicant Signature			