MANCHESTER LOCAL SCHOOL DISTRICT

Nick RobertsSuperintendent



Melinda Horsley

Treasurer

2024-2025 MLSD VOLUNTEER APPLICATION

Name:	Phone:	Phone:	
Mailing Address			
City	State	Zip	
Email:	<mark>completed each ye</mark>	I that a new application must be ear that you volunteer. This overs the current school year*	
Please answer the following questions for consi	deration as a volunteer:		
1. Which Building Are You Volunteering for:	Elementary	High School	
Activity (Please check all that apply):			
Building Aide	Chaperone	Athletics (HS)*	
Student Tutor	Other		
 Athletic Volunteers must complete the following prior to Board Approval: Coaches' Tool Chest' wh *First Aid, *CPR, *AED training, *Coaching I 2. Have you ever pleaded "guilty" or "no contest" of laws relating to child endangerment, child negle related to children? YES If you answered "yes" to the above question, pleas 3. Have you had a criminal background check with You are hereby informed that all volunteers are permitted by Am. Sub. S.B. 187. You must sch 	ich includes: Fundamentals, *Mental For been "convicted" of a misclect, child abuse, child molest NO e give a detailed explanation of the past year? Subject to a BCI & FBI crimi	Tealth Training Temeanor or felony violation of ation, rape or any other violation Ton the back of this form. The standard of the back of this form. The standard of the back of this form.	
	ere will be no exceptions.	Date of Signature	
Applicant, do not write bel	ow this line - For Administrative	review	
This volunteer is recommended not r	ecommended for the activiti	es listed.	
Administrative Signature Date	Board of Education	Approval Date	

Misdemeanor or Felony Explanation(s) from page (1) number (2):		