Whitefield Academy
Application for Service

Having gifts that differ according to the grace given to us, let us use them - Romans 12:6

Thank you for offering your services to be a part of the mission of Whitefield Academy. Please complete this authorization form and return it to the school office. As a part of our due diligence to ensure the safety and well-being of our students we routinely run background checks.

GENERAL INFORMATION

Name:_____
First Middle Maiden Last

Other/Former Names: _____

Address:_____ Apt:_____

City:_____ State:_____ Zip:_____

Home Phone: (____)_____ Cell: (____)_____

Email: _____ SSN: _____-_____- _____

Employer:_____ Work Phone: (____)_____

Date of Birth (mm/dd/yyyy): _____ Gender:_____

☐ Yes ☐ No Have you used illegal drugs in the last five years?

☐ Yes ☐ No Have you ever been convicted of, or pled guilty to a crime, either a misdemeanor or felony (including but not limited to drug-related charges, crimes of violence, theft, or motor vehicle violations)?

☐ Yes ☐ No Have you ever committed and/or been convicted of child abuse or a crime involving actual or attempted sexual activity with a minor?

☐ Yes ☐ No Is there anything in your past or current life that might be a problem if we found out about it later?

If you answered "Yes" for any of these questions, please provide details on a separate sheet of paper.

DRIVER SCREENING

If you are volunteering to drive either your own vehicle or the school bus, **please provide a copy of your driver's license along with a copy of your insurance card** and submit it with this application.

If you have had a traffic accident or serious moving violation in the past three years, please describe the incident and the results/status of the incident on a separate sheet of paper and submit it with this application.

APPLICANT'S STATEMENT

I affirm that the information contained in this application is correct to the best of my knowledge. I authorize any references or any other person or organization, whether listed in this application or not, to use the information provided for screening and to give any information, including opinions, they may have regarding my character or fitness for a volunteer or other position or as a vehicle driver for Whitefield. I release all such parties from liability for any damage that may result from furnishing such evaluations, information or opinions to Whitefield Academy, and I waive any right that I have to inspect such information provided on my behalf. I understand and consent to any criminal records check which may be conducted by the school. The above information in this application is correct to the best of my knowledge. I agree to be bound by the by-laws and policies and procedures of Whitefield Academy of which I have been offered a copy.

Applicant's Signature: _____ **Date:** _____