



**NRHEG Public Schools**  
 306 Ash Avenue South, New Richland, MN 56072  
 507-465-3206  
 nrheg.k12.mn.us

## VOLUNTEER REGISTRATION

I. Personal Information		
Last Name:	First Name:	Middle Name:
Address:		Other Name:
City:	State:	Zip Code:
Telephone Numbers: Home ( )      Other: ( )		Email:
Date of Birth:	Today's Date:	Current School Year:
Building to Volunteer at <input type="checkbox"/> Elementary <input type="checkbox"/> Secondary <input type="checkbox"/> Community Ed		
Describe volunteer service:		

**Note: We cannot process this form without Date of Birth**

II. Background Information
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**Background Checks are required for all volunteers. Classroom and Community Ed volunteer background checks are paid by the District. All other volunteer types are paid by the volunteer. Please note that there may be an additional fee if the initial background check requires further searches) The volunteer may not begin until the background check has been received and registration has been approved.** Criminal charges or convictions are not an automatic bar to volunteer service. The District will consider the nature of offense, date of the offense, and relationship between the offense and volunteer position.

Have you ever been convicted of a: felony, misdemeanor, or forfeiture (fine for municipal ordinance violation)? If yes, attach an explanation, giving dates and location (City, State):	<input type="checkbox"/> Yes <input type="checkbox"/> NO
Is there a felony, misdemeanor, or forfeiture charge currently pending against you? If yes, attach an explanation, giving dates and location (city, state):	<input type="checkbox"/> Yes <input type="checkbox"/> NO

III. Agreement
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I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentations or willful omissions of facts shall be sufficient cause for disqualification from volunteer service. Furthermore, it is understood that this registration and records become the property of the District, which reserves the right to accept or reject it. I further agree to abide by all rules, regulations, and policies of the District. I hereby authorize the NRHEG Public Schools to utilize third party agencies to collect reports by contacting law enforcement agencies, city, state, county, and federal courts to release information about my background including, but not limited to, information about my criminal record. This releases the aforesaid parties from any liability and responsibility for collecting the above information. This release shall remain in effect for the length of my volunteer service. I understand I have the right to obtain a copy of background check reports if the written request is made within 60 days of signature below.

I understand I will be responsible for maintain confidentiality regarding information seen and/or heard while working as a volunteer.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Equal Opportunity Assurance: NRHEG Public Schools complies with provision of Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act 1973, and Title VI of the Civil Rights Act of 1964, and does not discriminate of the basis of race, color, religion, national origin or ancestry, age, sex, marital status or handicap in its employment practices. Questions regarding compliance should be addressed to: Local Compliance Office, Superintendent of Schools.

Office Use Only		
Date Registration Received:	Background Check Approved (Superintendent):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date added to Volunteer List:	Registration Approved (Principal/Comm. Ed. Director/AD):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Volunteer Type:	District Paid: <input type="checkbox"/> Classroom <input type="checkbox"/> Community Ed <input type="checkbox"/> Other                Volunteer paid: <input type="checkbox"/> Field Trip <input type="checkbox"/> Coach <input type="checkbox"/> Other	