



Baltimore County Public Schools Application for Volunteer Services

School Year: 2014-2015



I. Volunteer Information

Title (if applicable): ☐ Dr. ☐ Mr. ☒ Ms. ☐ Mrs. Date of Birth: 11/22/1966

First Name: Barbara Middle Name: Jean

Last Name: Souter Suffix: _____

Other Names Previously Used (if applicable): Bonnie

Present Street Address: 57 Murdock Rd

City: Baltimore State: MD Zip Code: 21212

Primary Phone: 410-825-0772 ☐ Home ☐ Work ☐ Cell ☐ Other

Alternate Phone: 410-262-5245 ☐ Home ☐ Work ☐ Cell ☐ Other

Email Address: bonbons0220@gmail.com

If you are related to a child or children in the school in which you wish to volunteer, please list below:

Name of child or children:	Relationship to child or children:
<u>Robert W. S. Haine</u>	<u>mother</u>
_____	_____
_____	_____
_____	_____

II. Preferred Assignment

School Preference: Dumbarton Middle

Assignment Preference:

- | | |
|---|--|
| <input type="checkbox"/> Assisting a teacher in the classroom | <input type="checkbox"/> Performing clerical tasks |
| <input type="checkbox"/> Working in the library | <input type="checkbox"/> No preference |
| <input type="checkbox"/> Other: <u>Field Trip Chaperone</u> | |

What interests you about volunteering? Going on a field trip with my son.

Indicate day(s) and time(s) available to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning				9-12	
Afternoon				12-2	

If you are volunteering for a specific occasion/event(s), please note event name/date here:

10/30/14 Dumbarton Zoo Field Trip

III. Volunteer Experience

Have you volunteered or do you currently volunteer at a BCPS school other than the school where you are applying to volunteer today? ☐ Yes ☒ No

If yes, where? _____

Are you still volunteering at this location? ☐ Yes ☒ No

Are you requesting to volunteer in connection with another group or agency? ☐ Yes ☒ No

If yes, what is the organization? _____

Are you currently a BCPS employee? ☐ Yes ☒ No

If yes, in what capacity? _____

IV. In Case of Emergency

Directions: Please list two people to notify in case of emergency.

Note: Teenagers should list a parent/guardian as ONE of the two emergency contacts.

Name # 1: **Thomas Haine** _____

Phone Number: (home) **4108234332** (work) **4105167048** (cell) **4432805656**

Home Address: **7804 Ruxway Rd** _____

City: **Baltimore** State: **MD** Zip Code: **21212**

Relation to applicant: **friend** _____

Name # 2: **Freya Zellerhoff** _____

Phone Number: (home) **4103375081** (work) _____ (cell) **4436912886**

Home Address: **609 Yarmouth Rd** _____

City: **Baltimore** State: **MD** Zip Code: **21286**

Relation to applicant: **friend** _____

V. Affidavit of Criminal History

I understand that in order to volunteer my services to Baltimore County Public Schools, prospective volunteers must certify that they do not have a history of criminal violations, or must disclose such violations if they occurred after the employee or volunteer reached the age of 18 years old. Violations that occurred prior to the age of 18 years old must be disclosed if they are public information.

I understand that for the purposes of this affidavit, a person is deemed to be *arrested and/or convicted of committing a felony or misdemeanor* if such person has been arrested or convicted under the laws of any state, the United States, or any territory subject to the jurisdiction of the United States. In addition, I understand that *convicted* means a conviction by a jury or court and also includes the forfeiture of any bail, bond, or other security deposited to secure the appearance by a person charged with a felony or misdemeanor, the payment of a fine, a plea of nolo contendere, and the imposition of a deferred or suspended sentence by the court.

I understand that by checking a box, placing my initials, and/or affixing my electronic signature on this affidavit, I am affirming, to the best of my knowledge and belief, that all information that I have provided is accurate, true, and correct.

(1) That I **have not** been arrested and/or convicted of any felony or misdemeanor, other than minor traffic violations *not* involving the use of alcohol and/or drugs. ☒ or INITIAL: BJS

OR:

(2) That I **have been** arrested and/or convicted of any felony or misdemeanor, other than minor traffic violations not involving the use of alcohol and/or drugs. That such conviction(s) occurred **prior** to the time I reached the age of 18 years old. ☐ or INITIAL: _____

Please complete the information requested below for the following convictions: Weapons Offense/Class 1, 2, 3, or 4 Felony

Date of conviction: _____

Court entering judgment of conviction: _____

Nature of the offense: _____

Attach additional information if necessary.

AND/OR:

(3) That I **have been** arrested and/or convicted of a felony or misdemeanor, other than minor traffic violations *not* involving the use of alcohol and/or drugs. That such conviction(s) occurred **after** the time I reached the age of 18 years old and are detailed below. ☐ or INITIAL: _____

Date of arrest: _____

Date of conviction: _____

Court entering judgment of conviction: _____

Nature of the offense: _____

Attach additional information if necessary.

ALL APPLICANTS MUST COMPLETE:

I agree to notify Baltimore County Public Schools immediately in the event that I am arrested or convicted of any such felony or misdemeanor during my volunteer service with Baltimore County Public Schools. (**Exception:** Youth under the age of 18 years do not need to provide supplemental information unless that information is not confidential i.e. Weapons or Class 1, 2, 3, 4 Felony). ☒ or INITIAL: BJS

I understand that I am required to sign an affidavit of criminal history on a periodic basis to verify continued status. I acknowledge that I have completed this affidavit fully and truthfully. ☒ (or sign below)

Volunteer Signature

10/28/14

Date

VI. Agreements

Directions: Check all boxes or sign and date below.

1. I understand that Baltimore County Public Schools reserves the right to reject any volunteer applicant with or without cause. ☐
2. I agree to observe all Baltimore County Public Schools policies, rules, and procedures. ☐
3. I understand that volunteers will serve under the direct or limited supervision of a Baltimore County Public Schools administrator or teacher. ☐
4. I understand that I may be required at any time to submit to additional background checks. ☐
5. I understand that principals, or their designees, may limit my volunteer activity or may dismiss me from volunteer service without providing a reason for denial or dismissal. ☐
6. I hereby release all of the above stated entities and their agents from any and all liability in connection with investigating or evaluating my application. ☐
7. I have read and understood the above stated information within this release and am agreeing of my own free will. ☒

Signature



10/28/2014

Date

For Administrative Use Only

I have reviewed this application and I have checked and affirm that the applicant's name does not appear on the Maryland Sex Offender Registry (<http://www.socem.info/>). ☐

Name of Principal/Designee: _____

Phone Number: _____

Date: _____