



# Jackson Day School

## Volunteer Registration Form: Level I and II

PH 704.301.5516

Approved/Disapproved:   A     D  

School Year: \_\_\_\_\_ Level requested: 1 \_\_\_\_\_ 2 \_\_\_\_\_ Date of Request: \_\_\_\_\_

Volunteer's name: \_\_\_\_\_ Relation to student/staff: \_\_\_\_\_

Student: \_\_\_\_\_ Student's Grade: \_\_\_\_\_ Student's Teacher: \_\_\_\_\_

**Level 1 Volunteers** may assist the staff and faculty of MID in student services but may not be with students alone whether on MID property or elsewhere.

**Level 2 Volunteers**, under the direction of the school or staff, may accompany students without the presence of school staff for school purposes. Only Level 2 Volunteers may accompany groups on field trips due to emergency procedures that may result in their sole supervision of students.

### Volunteer Information

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Other Names: (*Maiden/nickname/etc.*) \_\_\_\_\_ **Level 2 Only-** Social Security#: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Current Address: \_\_\_\_\_

Previous Address 1: \_\_\_\_\_

Previous Address 2: \_\_\_\_\_

Email Address 1: \_\_\_\_\_ Email Address 2: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

☐ Have you ever been convicted of, pleaded no contest to, or received a Prayer for Judgement for a misdemeanor or a felony? \_\_\_\_\_ If yes, please explain? \_\_\_\_\_

I understand that by submitting this form to Mountain Island Day, I am submitting to all of the rules and regulations set forth by MID and will uphold them. I understand that when volunteering I am in a position of supervision over the minors in my care and accept that responsibility. I declare that all of the statements made in this application are true, complete, and correct to the best of my knowledge.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Designated School Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Designated School Staff Printed Name: \_\_\_\_\_ Background passed: \_\_\_\_\_



# Jackson Day School

## ADULT VOLUNTEER WAIVER OF LIABILITY for service with Jackson Day School (for those over 18)

I have reviewed and understand and will comply with the following RELEASE, INDEMNITY AND HOLD HARMLESS AGREEMENT and other terms of my volunteer work in the Jackson Day School/Formerly Mountain Island Day Community Charter School (JDS) program as set forth on this document.

### RELEASE, INDEMNITY AND HOLD HARMLESS AGREEMENT

**In consideration of JDS, the individual(s) undersigned agrees to volunteer through JDS onsite or off and agrees to the following:**

- ☐ The undersigned volunteers agree to release JDS from and against all claims, damages, losses and expenses arising out of the performance of any work done herein by the individual volunteer or group.
- ☐ The release of liability and indemnity includes any loss on account of bodily injury, illness or for property damage, including loss of use suffered by the individual volunteer while providing services coordinated by JDS.
- ☐ Such release of liability and indemnity includes any negligent act or omission by JDS occasioned by such work performed or the property.
- ☐ The undersigned volunteer agrees to participate in publicizing and fundraising for JDS and agrees to allow the use of photographs and other likenesses of us in such publicity.

### GENERAL SAFETY GUIDELINES TO BE FOLLOWED BY ALL VOLUNTEERS

1. Check in and check out at designated location
2. Remain at designated check in location until given a volunteer job assignment
3. Observe all written and stated policies and guidelines given by the company, supervisors and staff
4. If an unsafe situation is observed, take reasonable efforts to correct it and report the concern to the staff leader
5. Report injuries immediately at the check in station
6. Use all equipment in a safe manner
7. Assume responsibility for the security and safety of anything you use or let others use in order to support the job duties.

### Volunteer Information:

\_\_\_\_\_ I have completed the Volunteer Registration Form: Level I and Level II

(Please Print)

Volunteer's Full Name: \_\_\_\_\_ School year: \_\_\_\_\_

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Daytime Phone Number/Cell Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

*This form must be completed and returned to the appropriate staff leader  
each school year (or each time requested) that you wish to volunteer through Jackson Day School.*

**Thank you.**