

For Volunteer Office  
Use Only  
Check Completed \_\_\_\_\_  
Entered \_\_\_\_\_

Citrus County School District's Volunteer Program  
1007 West Main Street  
Inverness, FL 34450

Volunteer \_\_\_\_\_  
Fingerprint \_\_\_\_\_

**Safety Volunteer Application**

**Page 1 Personal Information**

*(Please Print - Use Pen Only)*

Name: \_\_\_\_\_  
                    First                    Middle                    Last                    (Maiden Name, if applicable)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (If different): \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ (Cell or Business) \_\_\_\_\_

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

Second Language: (Please list) \_\_\_\_\_

Do you have children/grandchildren in Citrus County Schools? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list their name(s), school(s) and teacher's name(s): \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Please list health condition(s) that may require emergency treatment: (e.g. diabetic, heart condition): \_\_\_\_\_

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Training Date: \_\_\_\_\_ School Placement (Please list all schools): \_\_\_\_\_

Referring Organization/Agency: (RSVP, Take Stock In Children, Master Gardeners, Big Brothers Big Sisters, Jr. Achievement, etc) \_\_\_\_\_

Copy of Driver's License on File: \_\_\_\_\_ Background Check/Fingerprinting Completed: \_\_\_\_\_

School Notification Completed: \_\_\_\_\_ Identification Badge: \_\_\_\_\_

School Board Approval Date: \_\_\_\_\_ District Coordinator's Signature: \_\_\_\_\_

**Placement Data**

*(Please Print– Use Pen Only)*

Please share information regarding your preferences for your volunteer experience. This information will be shared with the school in which you have chosen to volunteer.

School/Site(s) Preferred: \_\_\_\_\_

I prefer to volunteer: Days/Hours Preferred: \_\_\_\_\_

**Previous Security/Law Enforcement-Related Employment**

Please provide information regarding previous security-related work experiences:

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone/Contact Information: \_\_\_\_\_

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone/Contact Information: \_\_\_\_\_

Company: \_\_\_\_\_ Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone/Contact Information: \_\_\_\_\_

**Do you currently hold any Security/Law Enforcement Certifications/Licenses?  
Please attach a copy to the application.**

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

**If you are retired from the military, please attach a copy of your DD-214.**

**References**

Please list three (3) professional references not related to you. If you don't have three professional references, then list personal, unrelated references.

Name: \_\_\_\_\_ Professional \_\_\_\_\_ Personal \_\_\_\_\_

Phone/Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_ Professional \_\_\_\_\_ Personal \_\_\_\_\_

Phone/Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_ Professional \_\_\_\_\_ Personal \_\_\_\_\_

Phone/Contact Information: \_\_\_\_\_

**Security Questions:**

To be considered for volunteering in the Citrus County School District, a criminal history check will be conducted. You must answer all background information. Acknowledgement of a prior arrest and/or conviction will not automatically disqualify you from consideration for volunteering. However, your omission of any criminal history information may subject you to disqualification. Any false statement knowingly made in this application is grounds for disqualification to volunteer in the Citrus County School district for a minimum of one year.

1) In relation to a criminal offense (including dismissed or dropped, military and juvenile arrests/charges); have you ever (been):

- Arrested
- Charged
- Convicted
- Pled nolo contendere (no contest)
- Had a record sealed or expunged
- Placed on probation
- Enrolled in a pretrial diversion program
- Had adjudication withheld in a criminal offense, felony or misdemeanor

YES \_\_\_\_\_ NO \_\_\_\_\_

If you answered yes to question 1 on page 3, please fill in boxes below and attach documentation showing arrest report, final disposition, proof of completed probation, etc.:

Date (mm/yyyy)	Location	Actual Charge & Statute #	Level of Charge	Disposition/Outcome

2) Are you currently being investigated for any criminal offense, other than a non-criminal or minor traffic violation?

YES \_\_\_\_\_ NO \_\_\_\_\_

3) Have you ever had a report of child abuse or sexual activities involving a minor filed against you or been named by a state agency responsible for child welfare as a perpetrator in an indicated report of child abuse or neglect where cause was found?

YES \_\_\_\_\_ NO \_\_\_\_\_

If you answered yes to question 2 or 3, in the space below please provide an explanation. You must attach all corresponding documentation when submitting your application. Applications without documentation will not be accepted.

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(Note: Any and all criminal history documents provided to or acquired by the Citrus County School Board during the volunteer application process are considered property of CCSB and will not be returned or produced to the applicant.)

**A copy of your current Driver's License MUST be attached to this application in order to complete the process. All applications MUST be returned signed and dated.**

- I hereby certify that each answer is true and correct
- I understand that any incomplete or false information furnished by me may subject me to disqualification.
- I understand after the dated/signed application that it is my responsibility to report within 48 hours of an arrest or new charge as it may or may not have an adverse effect on my volunteer status (Human Resources, 352-726-1931 ext. 2730).
- I understand that failure to report will be an automatic decline for that school year.
- I understand that any information submitted on this application is public record.
- I understand that the District and/or School Administrator has the final authority over the selection of volunteers.

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

\_\_\_\_\_  
Date