

Human Resources Divisions 1515 West Mission Road

AUSD Volunteer Annual Site Registration Form

1515 West Mission Road		Date:School/Location:								
Alhambra, CA 91803				(Rev. June 2024)						
First Name (Please PRINT)	Middle Initial	Last Name	Gender (Circle one) Male	Address: (Number/Street) (Apartment		(Apartment)	Home Phone:			
			Female	(City)		(Zip Code)	Cell Ph	one:		
In case of an EMERGENCY	Children Name(s)	Children Currently Attending AUSD: Name(s) Grade Room Please "X" your				Interest:				
Name:		I wish to only volunteer in events/								
Phone Number:	<u> </u>			activities my child is involved in.						
Relationship:				I wish to volunteer in school events/activities as needed.						
Mon Tue We	ed Thu	Fri (Other)								
Education/ESSA Requirement (Circle one): HS Some College A.A B.A./B.S M.A./M.S				Tuency in Language(s)	uage(s) – Other tha	e(s) – Other than English: Speak Read Write				
Ed.D./Ph.D Other:										
Previous volunteer experience:										
Thank you for your willingness to volunteer to help our students. To ensure the safety of students, the Board of Education of the Alhambra Unified School District requires <i>all</i> volunteers to comply with Board Policy (BP1240) and Administrative Regulation (AR1240). Please read and initial the following statements:										
(1) The Alhambra Unified School District believes every stude from crime, violence, drugs and abuse. The District reserves to f criminal history.										
(2) I understand school volunteers are required to sign-in and o result before starting volunteer service. A copy of my T.B. test soon as possible.								Initial		
(3) I certify under penalty and perjury and in conformance with Ed. Code Section 35021 that I have not been required to register as a sex offender pursuant to Penal Code Sections 290 and 290.4.								Initial		
(4) I understand that the Principal has the discretion to approve or disapprove volunteers and volunteer assignments.								Initial		
Volunteer Signature: Date:										
For School/District Use Only			0 1 187 16	30 4 °						
Activities T.B. Clearance	Verified by (Name/In	School Verifi	Copies on file	e Prin	Principal's (or Designee's) Signature/Initial					
Educational Level (circle one)		 	_							
HS AA BA/S MA/S EdD/PhD Assignment/Placement Notes										