

Security / Background



Volunteer Application

We are delighted to process your application to volunteer with **Indian Prairie School District 204!** Completion of this form is **required annually**. **Thank you** for offering your time, talents, and skills to enhance the education of our students!

Have you ever been convicted of a felony related to violence?	
C Yes No	
Have you ever been convicted of a felony related to weapons charges?	
C Yes No	
Have you ever been convicted of a felony related to crimes against/involving children?	
C Yes C No	
If you selected 'YES' to any of the above questions, please provide an explanation of the charges below, including	
disposition. In addition, this volunteer application will need to be reviewed and approved by the Indian Prairie School	
District's Human Resources Administration.	
IMPORTANT VOLUNTEER POLICIES AND GUIDELINES	
1. All volunteers <u>must</u> sign in and submit state identification for screening a	the school office before proceeding
to their volunteer assignment.	
2. Volunteers may not dispense any medications (prescription or over the counter) to students.	
3. Volunteers <u>may not</u> have any physical contact with students. Volunteers <u>may not</u> be alone with a student or	
outside of the direct supervision of district staff or district approved sponsors. Volunteers <u>may not</u> exchange	
any personal contact information between volunteer and student including but not limited to, email addresses,	
social media contacts or phone numbers.	
4. Volunteers <u>may not</u> communicate outside of the school or activity for any reason without the consent of the	
student's parent/guardian. 5. Volunteers, unless specifically permitted by State law, <u>may not</u> possess a weapon, any object that can	
reasonably be considered a weapon or looks like a weapon, or any dangerous device on school grounds or	
school sponsored activity.	
I have read and understand the above guidelines.	
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Volunteer's Name: Scho	001:
Student's Name: Student's Teach	ar.
Student's Name: Student's Teach	
Volunteer's Signature: D	ate:
Activity Name: Sponsor's Nam	e:
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