



LOS ANGELES UNIFIED SCHOOL DISTRICT
POLICY BULLETIN

Attachment A

Los Angeles Unified School District
School Volunteer Application

Check One: [ ] Parent at Child's School [ ] Student LAUSD K-12 [ ] Community other Adults
[ ] D.O.V.E.S. [ ] Staff LAUSD Employee [ ] Intern [ ] Mentor
School Year \_\_\_\_\_ [ ] New Volunteer Volunteers Previous School \_\_\_\_\_
Employee Number if LAUSD Employee \_\_\_\_\_
Organization/Partnership \_\_\_\_\_ Number of Hours per Week \_\_\_\_\_
Volunteer Assigned to \_\_\_\_\_ District Office \_\_\_\_\_
Date of Skin Test \_\_\_\_\_ Date of X-ray / Doctor's Clearance \_\_\_\_\_
Date California Megan's Law Database \_\_\_\_\_ Fingerprint Needed: [ ] Yes [ ] No
Volunteer Assignment \_\_\_\_\_ Classroom Number \_\_\_\_\_
Volunteer Coordinator Employee # \_\_\_\_\_
Volunteer Coordinator: First Name \_\_\_\_\_ Last Name \_\_\_\_\_
Title [ ] Mrs. [ ] Ms. [ ] Mr.
First Name \_\_\_\_\_ Last Name \_\_\_\_\_
Address \_\_\_\_\_ City \_\_\_\_\_
State \_\_\_\_\_ Zip \_\_\_\_\_
Telephone #: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work/Business \_\_\_\_\_
Birth Date \_\_\_\_\_ Email \_\_\_\_\_
In case of an emergency, please call:
Contact Name 1 \_\_\_\_\_ Contact 1 Phone \_\_\_\_\_
Contact Name 2 \_\_\_\_\_ Contact 2 Phone \_\_\_\_\_
How were you Recruited: [ ] Newspaper [ ] Radio [ ] School [ ] Flyer [ ] TV [ ] Internet [ ] Other \_\_\_\_\_
Education \_\_\_\_\_ Language Spoken \_\_\_\_\_
Degree Achieved \_\_\_\_\_ Language Spoken 2 \_\_\_\_\_
Work Experience \_\_\_\_\_
Employed? If so where \_\_\_\_\_ Occupation \_\_\_\_\_
Volunteer Experiences \_\_\_\_\_
I can serve [ ] Mornings [ ] Afternoon [ ] Evenings
Days of week I can serve [ ] Monday [ ] Tuesday [ ] Wednesday [ ] Thursday [ ] Friday
Maximum # of hours I can serve \_\_\_\_\_
Grade Level: [ ] Pre-School & K [ ] Elementary (Primary) 1-3 [ ] Elementary (Upper) 4-6 [ ] Middle [ ] High
Special Programs: [ ] After School [ ] SRLDP [ ] Other \_\_\_\_\_
I would like to volunteer in the following areas: [ ] Reading [ ] English [ ] Social Studies [ ] Foreign Language
[ ] Art [ ] Library [ ] Other \_\_\_\_\_
Date Submitted \_\_\_\_\_
Created Date \_\_\_\_\_ Created by \_\_\_\_\_
Update Date \_\_\_\_\_ Update by \_\_\_\_\_
Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_
Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_
Parent Signature (LAUSD K-12 Student Only) \_\_\_\_\_