



**Communities In Schools
of Randolph County**
1011 Sunset Avenue
Asheboro, NC 27203

PH: 336.625.0008
FX: 336.625.0058
www.randolph.communitiesinschools.org

VOLUNTEER APPLICATION

(Please Print)

Applicant's Full Name: _____ Maiden Name: _____

Address: _____

City/State/Zip: _____ Cell Phone: _____

Home Phone: _____ Work Phone: _____

Place of Employment: _____

Work Address: _____

E-mail: _____ Fax #: _____

Languages spoken (other than English): _____

<i>Gender:</i> <input type="checkbox"/> Male <input type="checkbox"/> Female	<i>Race:</i> <input type="checkbox"/> Black/African American <input type="checkbox"/> Other (please indicate):	<input type="checkbox"/> White/Caucasian <input type="checkbox"/> Hispanic/Latino
<i>Date of Birth:</i>	<i>Social Security #:</i>	
<i>Have you lived in NC for the past 2 years?</i> <input type="checkbox"/> yes <input type="checkbox"/> no	If you have NOT lived in NC for the past 2 years, list other residences (street address, city, state, county) and how long for the prior 2 years (continue on back, if necessary).	

In case of an emergency during your volunteer service, please list name and phone number of whom to contact.

Name	Relationship	Phone Number(s)
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Name	Relationship	Phone Number(s)
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Have you ever been arrested, convicted of, pleaded no contest to or received a prayer for judgment for a misdemeanor or felony (other than traffic offenses)? Yes No

If yes, please explain. _____

I declare that all of the statements made in this application are true, complete, and correct to the best of my knowledge. I hereby authorize Communities In Schools of Randolph County to conduct a criminal background check upon receipt of the above information and, thereafter, biannually as long as I remain a volunteer.

Signature of Applicant _____ Date _____