



## Marion ISD Volunteer Program Application

**If you would like to volunteer in a classroom, on a campus, on a field trip, mentor, or chaperone students, you must complete this application and submit to Human Resources or the campus office.**

In order to determine suitability for volunteering and/or mentoring in a school setting, I authorize Marion Independent School District, pursuant to Texas Education Code Section 22.083, to obtain any criminal history record information. I understand that this may include a search of local, state, and/or federal law enforcement agency records and hereby expressly release any and all information these agencies may provide.

***Please print all information legibly (except signature)***

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip Code)

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

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Please Circle Selection Below:

Sex: *Male* *Female* Ethnicity: *American Indian/Alaskan Native* *Asian/Pacific Islander*  
*African American* *Hispanic*  
*White* *Other*

Campus(es) I will volunteer/mentor: \_\_\_\_\_

As a volunteer/mentor, I agree to abide by the following

- 1) I will check in at the campus main office and wear identification provided by the school each time I visit.
- 2) I will dress and act in an appropriate manner at all times.
- 3) I will maintain confidentiality outside of school and will share with teachers and/or administrators any concerns that I may have related to student welfare and/or safety.
- 4) I will not disclose, use or disseminate student photographs or personal information regarding students to anyone, to include on social media (Facebook, Twitter, etc.)
- 5) I will not have contact with students outside of school hours without the knowledge and/or consent of the student's parents.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_