

# Public Education Foundation of Anniston, Inc.

## School Volunteer Application

Name: \_\_\_\_\_ Birthday (Month and Day only) \_\_\_\_\_

Age:  High School Student  18-25 years  26-40 years  41-60 years  61 years and over

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Educational Background:  High School  College Degree: \_\_\_\_\_

Special Training/skills/interests: \_\_\_\_\_

**Do you have children/grandchildren attending Anniston City Schools?**  Yes  No

### VOLUNTEER ASSIGNMENT PREFERENCE:

- Anniston High  Anniston Middle  Cobb Pre-K Academy  
 Golden Springs Elementary  Randolph Park Elementary  Tenth Street Elementary

Please indicate the types of activities that interest you or write in your own special interest.  
Check all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Reading Tutor         | <input type="checkbox"/> Class Act (Character Education) |
| <input type="checkbox"/> After School Tutoring | <input type="checkbox"/> Motivational Speaker            |
| <input type="checkbox"/> Mentoring             | <input type="checkbox"/> Library Assistant               |
| <input type="checkbox"/> Classroom Assistance  | <input type="checkbox"/> P.E./Playground                 |
| <input type="checkbox"/> Hall Monitor          | <input type="checkbox"/> Other: _____                    |

**Time Availability:**  Mornings  Afternoon

Are you willing to make a commitment for the entire school year?  Yes  No

If no, how much time can you offer? \_\_\_\_\_

For Mentors only: Are you available for a 1-2 hour training session?  Yes  No

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

Please submit completed application to the Public Education Foundation of Anniston, 1021 Noble Street, Suite 101, Anniston, AL 36201 or fax to 256-237-0937. **Thank you!**

Revised 8/2015

“Proud of Our Past – Committed to Our Future”





*Public Education Foundation of Anniston, Inc.*  
1021 Noble Street Suite 101 – Anniston, AL 36201  
256-237-0053 – 256-237-0937(fax)  
[www.pefanniston.org](http://www.pefanniston.org)

# School Volunteer Confidentiality Agreement

I understand that in the course of my volunteer time with the Public Education Foundation of Anniston, Inc., I may become aware of confidential information about specific students. This information may include such information as students' grades, academic performance, behavior, disabilities and related matters.

I understand and agree that I will not disclose such confidential information except to school employees that have a need to know.

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Volunteer Signature

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Date

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School Parent Specialist  
Or  
Executive Coordinator's Signature

## AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT

As part of its employment process, Public Education Foundation of Anniston routinely obtains consumer reports (background checks) on applicants and employees. The information contained in these reports may be used to deny an individual employment, continued employment, promotion or volunteer status with Public Education Foundation of Anniston.

I, the undersigned consumer, do hereby authorize **Public Education Foundation of Anniston, Inc.**, by and through an independent contractor (Risk Mitigation Services, Inc.), to procure a consumer report and/or investigative consumer report on me. These above-mentioned reports may include, but are not limited to: my driving history, education; employment history; social security number verification; criminal history/records; and/or any other public record. I further authorize **Public Education Foundation of Anniston, Inc.** to obtain electronic fingerprints (if requested) on me for purposes of obtaining a consumer report and/or investigative consumer report on me.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any consumer report and/or investigative consumer report prepared on me upon my written request to Risk Mitigation Services, Inc. that is made within a reasonable time after the date hereof. I also understand that I may request a written summary of my rights under 15 U.S.C. § 1681 *et. seq.* I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Public Education Foundation of Anniston, Inc. by and through Risk Mitigation Services, Inc., including, but not limited to, any courthouse, any public agency, any and all law enforcement agencies and any and all credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

It is my understanding this release shall remain in force for the duration of employment.

Printed name: \_\_\_\_\_  

First
Middle
Last

Signed name: \_\_\_\_\_ Date: \_\_\_\_\_

Current Address: \_\_\_\_\_  

Street/P.O. Box
City
State
Zip Code
Country

Dates: *From* \_\_\_/\_\_\_/\_\_\_ *to* \_\_\_/\_\_\_/\_\_\_

Former Address: \_\_\_\_\_  

Street/P.O. Box
City
State
Zip Code
Country

Dates: *From* \_\_\_/\_\_\_/\_\_\_ *to* \_\_\_/\_\_\_/\_\_\_

Former Address: \_\_\_\_\_  

Street/P.O. Box
City
State
Zip Code
Country

Dates: *From* \_\_\_/\_\_\_/\_\_\_ *to* \_\_\_/\_\_\_/\_\_\_

\*Social Security Number: \_\_\_\_\_ Daytime Telephone Number: \_\_\_\_\_

\*Driver's License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

\*Without this information, we will be unable to properly identify you in the event we find adverse information during the course of our background search.

