

CAPISTRANO UNIFIED SCHOOL DISTRICT
33122 Valle Road, San Juan Capistrano, CA 92675

TIER II VOLUNTEER FORM

Dear Tier II Volunteer,

Thank you for your interest in becoming a Tier II volunteer. You are an integral part of Capistrano Unified School District. Your participation enhances the instructional program and motivates and encourages students.

Tier II volunteers cannot have unsupervised contact with students and your responsibilities as a volunteer should always be supervised by CUSD staff. As a Tier II volunteer, you will need to fill out this form and be checked against the Megan's Law registry every school year.

Name of Volunteer: _____

Address: _____
(street) (city) (state) (zip code)

Phone Numbers: (_____) _____ (_____) _____
Home Cell

E-mail Address: _____

School Site: _____

Date Beginning Volunteering: _____

I will volunteer: _____ in the classroom
_____ in the library
_____ in the POD hallways and/or copier
_____ by taking work home
_____ other _____

I have reviewed the CUSD Volunteer Handbook and I am aware that during the course of volunteering, confidential information may be made available to me. I will not disseminate this information within or outside the school community.

I understand that my volunteer services are terminable at will whether by myself or by CUSD.

Volunteer's Signature

Date

To be completed by CUSD staff

_____ Megan's Law website has been checked

Employee's Initials

Employee's Name _____

Employee's Signature _____

Date