

*Merrimack School District
School Administrative Unit #26
36 McElwain Street
Merrimack, NH 03054*

SCHOOL VOLUNTEER APPLICATION AGREEMENT FORM

New Hampshire statute RSA 189:13-a requires that the Merrimack School District complete a background investigation that must include a criminal history records check on every selected applicant who wishes to be school volunteer before such volunteering can commence. The statute also requires that the selected applicant submit to the respective District, as employer, a notarized criminal history records release form and a complete set of fingerprints so that the background investigation may be completed.

I understand that a complete background investigation, including a criminal history records check, will be conducted on me and I agree that I will, upon request, provide the District with a notarized criminal record release authorization form and a complete set of fingerprints to facilitate that background check. I understand that I will not be considered a “school volunteer” until the completion and return of the criminal records check, with satisfactory results.

By signing below, the applicant acknowledges to having read and agreed to the above conditions:

Applicant’s Signature

Print Name

Date

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SCHOOL VOLUNTEERS CONFIDENTIALITY AGREEMENT

Specific information regarding SAU #26 students and/or its employees is confidential. Examples of such information include specific student data, special education related information, employee deduction/benefit information, etc. Any volunteer in the Merrimack School District or SAU #26 who has access to such information is required to keep such information confidential. Such information may be discussed with appropriate school district or SAU personnel.

Failure to exercise reasonable and prudent action in compliance with the above rule may result in termination of the volunteer/SAU relationship.

Printed Name of Volunteer: _____

I have read the above-posted notice regarding confidentiality of student/employee information. I understand its provisions and penalty.

Signature of Volunteer: _____ **Date:** _____

Witness: _____ **Date:** _____

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MERRIMACK SCHOOL VOLUNTEER APPLICATION

Please complete the application information below for our records:

PERSONAL INFORMATION		
LAST NAME:	FIRST NAME:	MIDDLE INITIAL:
MAILING ADDRESS:		
HOME PHONE NUMBER:	CELL PHONE NUMBER:	OTHER PHONE:
PERSONAL EMAIL ADDRESS:		

Other than a minor traffic violation, have you been convicted of a criminal offense?

___ Yes ___ No

If you answered yes to any of the above questions, please explain:

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1. *Volunteer Application Agreement Form, Criminal History Check, FBI Fingerprint*
 2. *Volunteer Confidentiality Agreement*
 3. *Volunteer Policy*

I acknowledge receipt of the above school district information. I understand that it is my responsibility to read and follow all school district policies. Failure to follow school district policies is grounds for disciplinary action, up to and including termination of volunteering.

Signature

Date