



Application ___ Criminal National ___
P. Check ___ WI Background ___
Orientation ___ Assignment ___
Start: _____ Day/Time _____

Volunteer Application

First Name Middle Name Last Name

Local Address (If at college, etc.): Street, City, State, Zip Code

Home Address (If different from local address): Street, City, State, Zip Code

Birthday Month: _____ Day: _____ Year: _____

Social Security Number (required for background check): _____

Phone with Area Code: _____

Email Address: _____

Emergency Contact #1: _____ Relationship: _____

Phone with Area Code: _____

Emergency Contact #2: _____ Relationship: _____

Phone with Area Code: _____

High School Currently Attending (if applicable) _____

College/University Currently Attending (if applicable) _____

Field of Study: _____ Current Year: _____

Current Employer: _____ Work Phone: _____

Do you speak any languages other than English? _____

Will your hours be for school or community credit? _____ If yes, how many hours required? _____

Volunteer assignments require sitting on the floor. Do you have the ability to lower yourself to the floor, sit on floor and raise yourself back up? Yes/No

Do you need any special accommodations to fulfill your volunteering assignment? _____

Penfield Montessori Volunteer Opportunities

- Classroom Assistant: Work alongside the students in the Montessori classroom environment.
- Specials: Assist with extra curricular programs during or after the school day, including, reading, gym, art, music, cooking, etc.
- Classroom Prep: Laminate, cut, file, make copies, sort and organizing.
- Office Support: Assist with administrative activities including filing, copying and computer work, etc.
- Events: Assist staff, families and children at day/evening special events.
- Projects: Clean, organize and garden.

Please circle your availability:

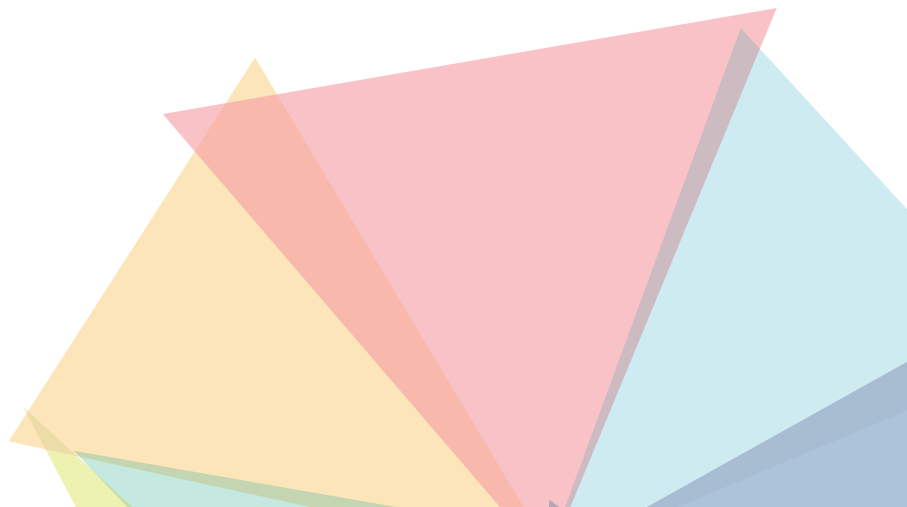
- Monday: 8:00-11:00 a.m., 11:00-1:00, 1:00-3:00 or 3:00-5:00 p.m.
Tuesday: 8:00-11:00 a.m., 11:00-1:00, 1:00-3:00 or 3:00-5:00 p.m.
Wednesday: 8:00-11:00 a.m., 11:00-1:00, 1:00-3:00 or 3:00-5:00 p.m.
Thursday: 8:00-11:00 a.m., 11:00-1:00, 1:00-3:00 or 3:00-5:00 p.m.
Friday: 8:00-11:00 a.m., 11:00-1:00, 1:00-3:00 or 3:00-5:00 p.m.

Please note, answering "yes" to any of the following questions does not automatically exclude a candidate from volunteering.

Have you ever been convicted of, plead guilty or no contest to a felony, misdemeanor or local ordinance violation? Yes___ No___ If yes, please explain: _____
Are you subject to any pending charges? Yes___ No___
If yes, please explain: _____

For United Way:

Date of Birth: _____
Gender: M___ F___
Have you Served in the Armed Forces: _____
Ethnic Origin: African American (non-Hispanic)___ Asian___ White (non-Hispanic)___ Hispanic___
American Indian or Alaska Native___ Native Hawaiian or Pacific Islander___
Other (please list all) _____



All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of a volunteer placement.

Signed by Applicant _____ Date _____

If under 18 years old:

This portion must be completed by a parent or legal guardian for individuals under the age of 18.

_____ (print name of volunteer) is applying to volunteer at Penfield Montessori Academy. The volunteer process includes a criminal background check through HireRight, Inc. As the parent or legal guardian of the above-referenced minor, I understand pre-volunteer checks are to safeguard the children at Penfield Montessori Academy and hereby provide my consent for the background check.

Signature of Parent or Legal Guardian: _____

Print Name: _____ Date: _____

Signature of Minor Applying to Volunteer _____ Date _____



Media Consent

Penfield Montessori Academy from time to time authorizes others to take photographs, film a video or present a radio broadcast featuring the children enrolled, along with staff and volunteers. These images may be incorporated into promotional material such as brochures, newsletters, posters and solicitation pieces or posted on our website and social media sites. This material may also be used by the news media or radio stations to inform the community about Penfield Montessori's programs.

If you have any questions concerning the use of this promotional material or any other information contained in this explanation, please ask BEFORE you sign the form.

Thank you for your cooperation, understanding and support.

Name of Volunteer

Date

YES, promotional material taken of me can be used in the manner stated above.

NO, promotional material taken of me may NOT be used in the manner stated above.

I understand I must notify Penfield Montessori if I want to change my media / no media consent.

Signature

Penfield Montessori Confidentiality Statement

As a volunteer of Penfield Montessori Academy, I understand that I may have access to confidential patient information which is protected by Wisconsin law and by the Health Insurance Portability and Accountability Act (HIPAA), as described in the Penfield Volunteer Handbook.

I understand that unauthorized access or unauthorized disclosure of confidential health care information regarding any Penfield Montessori Academy client or taking photography may be grounds for immediate termination as a volunteer, and may subject me to penalties under Wisconsin and/or Federal law.

Volunteer's Name (please print)

Volunteer's Signature

Date

Witness' Signature

Title

Date

Disclosure Authorization Form

Penfield Montessori Academy may request background information about you from a consumer reporting agency in connection with your volunteer application.

HireRight, Inc., or another consumer reporting agency, will obtain some of the reports for Penfield Montessori Academy. HireRight, Inc. is located at 5151 California Avenue, Irvine, CA 92617, and can be contacted at 800-490-7983.

The types of information that may be obtained include, but are not limited to: social security number verifications, criminal records checks, public court records checks, driving records checks, educational records checks, employment verifications, personal and professional references checks, licensing and certification records checks, drug testing results, etc. The information contained in the reports will be obtained from private and public record sources, including, as appropriate, personal interviews with sources, such as neighbors, friends and associates.

You may request more information about the nature and scope of any background checks for volunteers by contacting: Kara Rivera, Administrative Coordinator, Penfield Montessori, 1441 N. 24th Street, Milwaukee, WI 53233, 414-999-2330.

Authorization

I have carefully read and understand this Disclosure Authorization form. By my signature below, I consent to the release of background checks, including some prepared by a consumer reporting agency, such as HireRight, Inc. to Penfield Children's Center/Penfield Montessori Academy and its designated representatives and agents. I understand that if I volunteer for Penfield Montessori Academy, my consent will apply, and Penfield Children's Center/Penfield Montessori Academy may obtain reports, throughout my tenure as a volunteer.

By my signature below, I authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency.

First name: _____ Middle initial: _____ Last name: _____

Applicant signature: _____ Date: _____

Please note: This information will be used only for background screening purposes and will not be taken into consideration in any employment decisions.

