Texas Center for Arts and Academics Volunteer Application and Affidavit

| SECTION ONE: VOLUNTEER INFORMATION | | | |
|--|---|--|--|
| School Year: | Full Name: | | |
| Cell Phone: | Work Phone: | | |
| Current Address: | City: | | |
| State: | Zip: | | |
| Email: | | | |
| SECTION TWO: VERIFICA | ATION & CONSENT | | |
| As part of the application procheck and make the following designee to either approve or | become a volunteer for the Texas Center for Arts and Academics. cess, I will be required to undergo a criminal history background g certifications. All information will be reviewed by the School's r deny my application. I understand the School has the right to ation provided to verify its authenticity. | | |
| <u>-</u> | on for any circumstances arising from the questions below that you certify that none of the listed conditions have occurred by initialing | | |
| I have never been the s | subject of any child abuse investigation by any employer. | | |
| I have never been the s | subject of any sexual misconduct investigation by any employer. | | |
| I have never been the stagency. | ubject of any child abuse investigation by any government licensing | | |
| I have never been the s licensing agency. | ubject of any sexual misconduct investigation by any governmental | | |
| I have never been the agency. | subject of any child abuse investigation by any law enforcement | | |
| I have never been the enforcement agency. | e subject of any sexual misconduct investigation by any law | | |
| | subject of any child abuse investigation by any other agency or h identifying child abuse and/or sex crimes. | | |
| | subject of any sexual misconduct investigation by any other agency with identifying child abuse and/or sex crimes. | | |

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SECTION THREE: SIGNATURE

| I understand that falsification of a document related to school Section 37.10, Penal Code. | l records is a criminal office under |
|--|--------------------------------------|
| Signature of (Volunteer) Affiant | |
| Typed or Printed Name of Affiant | |
| STATE OF TEXAS | |
| COUNTY OF | |
| SUBSCRIBED AND SWORN TO ME on this, the day | of, 20 |
| Signature: Notary Public, State of Texas | |



Parents, Legal Guardians, and Grandparents Volunteer Acknowledgement

| I,Volunteer's Printed Name | _, acknowledge that Texas Center |
|--|----------------------------------|
| Volunteer's Printed Name For Arts + Academics (TCA+A) may process my driver license system prior to my volunteer date with the organization. | e through the School Check In |
| School Check In uses the volunteer's first name, last name, and driver license, to run a search against the national sex offender alerts school officials if a volunteer is a security risk. | • • |
| I have included a color copy of my driver license with this sign | ned form. |
| | |
| Signature of Volunteer | Date |
| TCA+A use: | |
| | |
| District/Campus Name | |
| District/Campus Representative Name (Print) | |
| Signature of District/Campus Representative | |
| Date of Scan | |

| A color copy of the front side of your driver license is also needed | ed. |
|--|-----|
| | |
| | |
| Γhanks. | |