

School Volunteer Form

Please check the school(s) you are interested in volunteering at:

Belwood Elementary Fairmount Elementary Red Bud Elementary Sonoraville Elementary	Tolbert Elementary W.L. Swain Elementary Ashworth Middle Red Bud Middle		Gordon Centra Sonoraville Hig	•
Name:	Date of Birth:			
Address:				
	Street	City	State	Zip Code
Cell Number:	Home Nu	umber:		<u>.</u>
Email Address:				
Best Method to Contact You:				
Student(s) Name(s):				
Do you speak any language other than English? Yes \Box No \Box				
If yes, please list language(s):				
Please list any special training/education that will be an asset when volunteering:				
Is there a specific time or day you would like to volunteer? If so, please list:				
Are you available for a long-term volunteer position? Yes \square No \square				
Please list any areas of interest:				
FOR OFFICE USE ONLY				
Rec'd: BGC: Compliance Director Training:				

Consent Form

	School Name:	
	orize Gordon County Schools to receive in the files of any federal, state, or loca	any criminal history record information pertaining to me I justice agency.
Full Name (Pri	nted)	Date of Birth
Address		Social Security Number
City, State, Zip		Notary (Notary Seal)
Signature		Date
Sex	Race Criminal His	tory Affirmation
Personal Affirn		complete all of this section will result in your application
being returned		, , , , , , , , , , , , , , , , , , ,
□ Yes □ No	•	renewed, terminated or have you resigned while under nission of a felony, a misdemeanor involving moral turpitude of ethics?
□ Yes □ No	Do you have any charges pending aga moral turpitude or a violation of any pe	inst you for committing a felony, a misdemeanor involving rofessions' code of ethics?
□ Yes □ No		(i.e. warning, reprimand, suspension, revocation, voluntary fessional certificate or license by any agency (in any state) andards Commission?
□ Yes □ No	 Pled guilty Been found guilty Entered a plea of nolo contendere Been granted first offender treatness 	nent without adjudication n program, or been placed under a court order whereby an
Professional Sta held by any lo understand tha	andards Commission to obtain copies of a cal, state or federal government agence	ation is true and correct. I hereby give permission to the any criminal and personnel records relating to me which are y or entity to release those records to the Commission. In other states and other agencies in the event that any
Signature:		Print Name:

MANDATED REPORTING INSTRUCTIONS

Volunteer's directions for completing Mandated Reporting are provided below. If you have any questions or need assistance in accessing the modules, please contact Sherri Hill at shill@gcbe.org or Jennifer Pulliam at jpulliam@gcbe.org.

STEP ONE: www.compliancedirector.org

STEP TWO: Click on the state in which you work.

STEP THREE: Click on the module you have been requested to complete. You will select the "Mandated

Reporting" module.

Your username is: Gordon County

Your password is: mobile

STEP FIVE: Complete the assigned module(s) as requested. Modules are usually about 20 minutes long.

STEP SIX: When you have successfully completed the module, it will ask you to select your system's

name and then login again. This last username and password will allow you to successfully register, thus creating a legal record that you have completed the training. Please enter "Volunteer" not the school name. You will also have the option to enter your email address

to receive a confirmation email.

Your username is: Gordon County

Your password is: mobile

After you receive your email confirmation, please email it to: shill@gcbe.org or jpulliam@gcbe.org.

Again, we are so appreciative of your willingness to give of your time to our schools. If you need further assistance, please feel free to contact Sherri Hill by phone at 706-629-7391 ext. 4769, or Jennifer Pulliam by phone at 706-879-5186.