

School/Office use only School Personnel \_\_\_\_\_ Date Approved \_\_\_\_\_

## **Volunteer Application**

		This	s is aNew Ap	plication <u>Rer</u>	newal		
	NIAAUE _ IS (Gibbins)	_NIAFW	NIAW_NIAM	NIAM-ENI	ABNICH-E_	_NICH-S	
Legal Nar	ne:						
		First		Middle	Last		
Driver's Li Address:	icense #:		DOB:	Gender	MaleFema	ale	
City:				State:	Postal Code:		
rionie riio	Address:State:Postal Code: City:State:Postal Code: Iome Phone:Cell Phone: Cmail:						
Please che	ck one: Pare	nt/Guardian	Grandparent/Rela	tive Community	Member Other		
		's Full Nam	e		Gra 	de	
Field Tri Recess A Book Fa Please chea Lunchea Muffins	ip Chaperone AideOffice irParking L ck any of the f on for Teachers	_Classroom A Aide _Cafe A ot Duty ollowing areas a _Yankee Ca nuts w/Dad _	AideBooster Clu s of interest for Sch andles Valogram	sonal Programs bInternational I	Day _Security for	-	
Breakfast_	_Grandparent	s Lunch					

I hereby consent to and authorize Newman International Academy to obtain from the Texas Department of Public Safety a criminal history record. I agree that information that relates to me may be obtained each year while I am a volunteer at the school or at such other times as is necessary to comply with the regulations governing the school and with school policy.

Signature:\_\_\_\_\_ Date: \_\_\_\_\_