

DEPARTMENT OF EDUCATION
WASHINGTON COUNTY, TENNESSEE

Received by _____

Date _____

APPLICATION FOR
Parent Volunteer

Please provide the information requested below and return to the Washington County Department of Education, 405 West College St., Jonesborough, TN 37659.

(Please print)

Volunteer's Name _____
Last
First
MI

Address _____
Street
City
State
Zip

Phone: Home (_____) _____ Work (_____) _____

Cell Phone (_____) _____ E-mail _____

Social Security number _____ Birth date _____

Emergency contact _____

Phone _____ Relationship _____

List the school(s) where you will volunteer:

_____ Please check here if you volunteer 20 or more hours per month.

TCA 37-5-511—Requires anyone volunteering more than 20 hours per month complete a criminal history disclosure (fingerprint TBI/FBI). All volunteers are required to sign a confidentiality agreement acknowledging FERPA (Family Educational Rights and Privacy Act) guidelines.

Signature: _____ Date: _____

Thank you for your commitment to serve as a school volunteer.