NORTH MONTEREY COUNTY UNIFIED SCHOOL DISTRICT

Renewal:

WAIVER AND RELEASE OF ALL CLAIMS

COACH AND VOLUNTEER AGREEMENT FORM (18 YEARS AND OLDER)

Pursuant to Education Code 45125, the District is authorized and obligated to establish a background screening process for Coaches and Volunteers wishing to serve in its schools.

Form must be completed every year if you wish to COACH or VOLUNTEER. Please provide all of the following information requested.

- ✓ If you were cleared last year, please check **Renewal** box at top. The site will notify you after confirmation from HR of TB and Fingerprint clearance. If there is a lapse of one year, new Fingerprint clearance is required.
- ✓ Process for first year volunteers: Completed form must have the Principal or Dept. Head signature. The form will then be given to Human Resources. Please bring your TB clearance, California Drivers License or Identification card. You will be given a Fingerprint Live Scan Form, and information of where you may make an appointment to get your fingerprints. It is the volunteers/coaches responsibility to follow through and complete the process in order to volunteer. We do not reimburse for volunteer TB's or Fingerprints.

Name:	Birth Date:
Address:	(If Parent) your child's name:
	Drivers License /ID No.:
Phone:	School/Dept:
Emergency Contact Information	
Name:	Email:
Phone Number:	
Have you ever been convicted of any offense other than a lf yes, please explain, giving Dates:	
☐ Classroom Volunteer	☐ Fieldtrip
☐ School/Classroom Celebration	☐ Other (please list)
□ Coach	
	WAIVER
I, the undersigned, hereby consent to perform service as a volunteer, \ensuremath{w} DISTRICT.	without compensation or reimbursement, for the NORTH MONTEREY COUNTY UNIFIED SCHOOL
I understand that I may be required to be fingerprinted for the purpos the Federal Bureau of Investigation, pursuant to Education Code 58751	se of obtaining a criminal record summary from the California State Department of Justice and I.
I fully understand the type of service for which I am volunteering. I unfeel comfortable doing.	derstand that I am responsible for my behavior and I will only perform volunteer service that I
I agree to abide by all state and federal laws and policies/regulations of	the Governing Board of the NMUSD.
,	ployees and agents, from all claims liability, or damages, suits, losses, costs and expenses for all service arising from my volunteer services for the NMCUSD and activities associated with the
This authorization shall remain in effect while I am involved in the above	e described volunteer service for the NORTH MONTEREY COUNTY UNIFIED SCHOOL DISTRICT.
Volunteer Signature	Date
Teachers Name:	Teachers Signature:
Comments:	
Description of Service to be performed: ☐ Supervised [☐ Unsupervised If Coach, will Coach receive stipend? ☐ YES ☐ NO
	☐ Unsupervised If Coach, will Coach receive stipend? ☐ YES ☐ NO
Description of Service to be performed: ☐ Supervised [☐ Unsupervised If Coach, will Coach receive stipend? ☐ YES ☐ NO Fingerprint Clearance Received

Human Resources Signature

Date

Print Volunteer Name