



VOLUNTEER APPLICATION

Thank you for your willingness to volunteer at Eastbrook Academy. We recognize that volunteers provide a necessary function in the life of our school. We are seeking volunteers who have a cheerful heart to serve, and who, by the pattern of their lives, are Christian role models.

| | |
|-------------------------|-------|
| Volunteer Name: | Date: |
| Address: | |
| Home Phone: | Cell: |
| Email: | |
| Emergency Contact Name: | Cell: |

Statement of Faith

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| <input type="checkbox"/> I affirm my personal relationship with our Lord Jesus Christ. |
| What is your local church affiliation? |

Personal References. Provide two character references. No relatives.
(Name, Complete Address, Phone, Relationship)

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|----|
| 1. |
| |
| 2. |
| |

Volunteer Interest (specify department, teacher, event, or duty)

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|--|
| <input type="checkbox"/> Event Planning and/or Production |
| <input type="checkbox"/> Social Media Planning and/or Posting |
| <input type="checkbox"/> Policy Input |
| <input type="checkbox"/> Classroom Volunteer/Tutor |
| <input type="checkbox"/> Other/General Staff Support |
| <input type="checkbox"/> Parent Advisory Council |
| <input type="checkbox"/> Warrior Sports Booster Club/Athletics |

See reverse for additional information.

Confidentiality Agreement

I understand that in the course of my association with Eastbrook Academy, I share the responsibility of maintaining the confidentiality of any employee or student information made available to me. I understand that it is my responsibility to assure rights and privacy of information both written and verbal.

As a volunteer, I will work with the highest standards, committed to the idea that my work will benefit students and bring glory and honor to Jesus Christ. I promise to work with an attitude of open-mindedness, interest, commitment, and a willingness to be trained.

I understand that in the performance of my duties, I am not to discuss academic or other confidential information regarding students or employees with anyone. Any breach of confidentiality will be carefully reviewed and if substantiated, could result in termination of volunteer involvement with the school, and may result in legal action.

Background Check Agreement

I authorize Eastbrook Academy to conduct a criminal records check. I understand and agree that any volunteer position I may receive from the school is conditioned upon the receipt of background information, including criminal background information. I have not been convicted of, nor am I under pending indictment for, any crimes, including sexual abuse or harassment.

I certify that I have carefully read and do understand the above statements.

| | |
|-------------------------|-------------------------------------|
| Birth Date: / / | Social Security Number: - - |
|-------------------------|-------------------------------------|

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|------------|-------|
| Signature: | Date: |
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