

# ATTENTION CURRENT VOLUNTEERS

The Annual Update form **must be submitted at the beginning of each school year in order to maintain 'Active Volunteer' status**. If it is not submitted, you will need to complete the fingerprinting background check and submit negative TB test results again before volunteering. Please complete the **Annual Update form (on back)** if you are a current volunteer who has cleared fingerprinting, submitted negative TB test results (due every 4 years), and plan to continue volunteering.

志願者年度更新表格必須在每個學年開始時填寫並提交，以確保您的志願者資格處於激活的狀態。錯過了提交表格的時間，您如需再成為學校的志願者則需要重新做指紋背景調查及提交合格的結核病測試。當前學校志願者年度更新表格如果您目前是學校的志願者，已經完成了指紋背景調查驗證及提交了合格的結核病測試結果，並希望繼續成為學校的志願者，請填寫提交的志願者年度更新表格。

El formulario de actualización anual debe presentarse al principio de cada año escolar con el fin de mantener la condición de 'Voluntariado activo'. Si no recibimos este papel, necesitará pagar y completar el DOJ identificación de antecedentes y presentar resultados de la prueba TB Tuberculosis. Complete el formulario de actualización anual si actualmente usted es un voluntario que ha sido aprobado por el Departamento de justicia toma de huellas, enviado los resultados negative de la prueba TB y planea continuar como voluntaria.

# 2021-22 ANNUAL VOLUNTEER UPDATE (for Current / Continuing Volunteers ONLY)

**PLEASE REMEMBER THAT THE ANNUAL UPDATE FORM IS DUE EACH YEAR IN ORDER TO MAINTAIN 'ACTIVE VOLUNTEER' STATUS. IF IT IS NOT SUBMITTED, YOU WILL NEED TO COMPLETE THE FINGERPRINTING BACKGROUND CHECK (\$47+ FEE) AND PROVIDE NEGATIVE TB TEST RESULTS AGAIN BEFORE VOLUNTEERING FOR THE SCHOOL.**

This form is **only for persons who are current / continuing volunteers**. If you are unsure of your fingerprinting and/or TB test date(s) please leave blank. Negative TB test results must be submitted every 4 years (10 years if X-ray). Please call the school office at 916-395-4890 if you have any questions.

### 當前學校志願者年度更新表格

如果您目前是學校的志願者，已經完成了指紋背景調查驗證及提交了合格的結核病測試結果，並希望繼續成為學校的志願者，請填寫提交的志願者年度更新表格。

志願者年度更新表格必須在每個學年開始時填寫並提交，以確保您的志願者資格處於激活的狀態。錯過了提交表格的時間，您如需再成為學校的志願者則需要重新做指紋背景調查及提交合格的結核病測試。

### FORMULARIO DE ACTUALIZACIÓN ANUAL VOLUNTARIOS ACTUALES (ACTIVOS)

Complete el formulario de actualización anual si actualmente usted es un voluntario que ha sido aprobado por el Departamento de justicia toma de huellas, enviado los resultados negative de la prueba TB y planea continuar como voluntaria.

El formulario de actualización anual debe presentarse al principio de cada año escolar con el fin de mantener la condición de 'Voluntariado activo'. Si no recibimos este papel, necesitará pagar y completar el DOJ identificación de antecedentes y presentar resultados de la prueba Tuberculosis.

Last Name	First Name	Middle Initial	Date of Birth
Previous Names (maiden name, alias, etc.)			
Address		City	ZIP
Home Phone		Cell Phone	Other
Email Address May We Email You Volunteer Updates? <input type="checkbox"/> Yes <input type="checkbox"/> No			
School Site(s) Where I Will Be Volunteering			
In Case of Emergency Notify		Relationship	Phone Number
Place of Employment			
If Parent, Grandparent, Relative, or Caregiver (circle one), Please List Student Name(s) / Teacher(s): If Community Volunteer, Please List Organization Associated with:			
<input type="checkbox"/> Date of TB Test (attach copy if submitting new test result): _____ - Valid Through (test year + 4) _____			
<input type="checkbox"/> Date of X-ray on File _____			
<input type="checkbox"/> I Have Fingerprints on File with SCUSD Security Office (Year Completed) _____			

I hereby certify that the information contained in this Registration Form is true and correct to the best of my knowledge and agree to have any of these statements checked by the District, unless I have indicated to the contrary. Furthermore, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the District as well as from the use or disclosure of such information by the District, or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this Registration Form may result in my failure to volunteer. I agree to adhere to the Volunteer Code of Conduct (posted on school website) at all times when I am a volunteer at a SCUSD school site or program.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Site Administrator

\_\_\_\_\_  
Date

Education Code §3502 prohibits the District from allowing a person required to register as a sex offender under Penal Code §290 to serve in a volunteer capacity as an aide or supervisor of students. Accordingly, the District will, before authorizing a person to serve as a volunteer, conduct an automated records check pursuant to Education Code §35021.1 and/or call the Department of Justice or the Sheriff's Office to inquire whether the individual is a registered sex offender pursuant to the process set forth in Penal Code § 290.4