

**SCHOOL ADMINISTRATIVE UNIT #15**

90 Farmer Road

Hooksett, NH 03106

Phone (603) 622-3731 • Fax (603) 669-4352

**Serving the School Districts of Auburn, Candia, and Hooksett**  
Equal Opportunity Employer • Equal Educational Opportunities

**SCHOOL VOLUNTEER APPLICATION**

Indicate District(s) you would like to volunteer for

Volunteering for what activity / sport?

\_\_\_\_\_ Auburn School District

\_\_\_\_\_

\_\_\_\_\_ Candia School District

\_\_\_\_\_

\_\_\_\_\_ Hooksett School District

\_\_\_\_\_

\_\_\_\_\_ Fred C. Underhill School

\_\_\_\_\_

\_\_\_\_\_ Hooksett Memorial School

\_\_\_\_\_

\_\_\_\_\_ David R. Cawley School

\_\_\_\_\_

**PERSONAL INFORMATION**

Full Name \_\_\_\_\_

Male

Address \_\_\_\_\_

Female

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_

Have you ever been convicted of any crime against children or other persons?  Yes  No

Are you presently charged with, but not convicted of any crime against children or other persons?

Yes  No If "Yes", to either question, please provide an explanation

**CERTIFICATION**

I certify that all answers given on this application are true and complete to the best of my knowledge and belief, and are made in good faith. I understand that any misrepresentation of information shall be considered sufficient cause for rejecting my application or cause for dismissal from my volunteer position. I also understand that my volunteer position may require a background investigation and I release from liability all persons and/or entities supplying information regarding my background.

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

Date \_\_\_\_\_

**OFFICE USE ONLY**

ID Verified (Picture ID with name and birth date)

1 Always Supervised (No CRC)

2 Not Supervised (CRC Required)

Signature of school representative who verified ID \_\_\_\_\_

3 Full Access to Building (CRC Required)