



# Anderson School District Two

## Volunteer Application

10990 Belton-Honea Path Highway  
Honea Path, South Carolina 29654  
864-369-7364

**Please submit this form to the school along with a picture ID**

For Principals:  
Direct Interaction with  
Students? (please initial  
below)

\_\_\_\_ YES

\_\_\_\_ NO

\_\_\_\_ School Approval

For DO:

\_\_\_\_ District Approval

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Copy of Picture ID Attached?  Yes  No

Date of Birth: \_\_\_\_\_ Gender (circle) Male Female

How long have you been a resident in South Carolina? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No If yes, give date(s) and disposition(s)

### Emergency Contact

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Name \_\_\_\_\_

School Preferences (*Circle Choices*) Marshall Primary Belton Elementary Belton Middle

BHP High School Honea Path Elementary Honea Path Middle Wright Elementary

### Areas of Volunteering (*Check Preferences*)

Tutor  School Volunteer  Chaperone  Other (describe) \_\_\_\_\_

### Availability (*Check One*):

Regular Volunteer (regularly scheduled visits at least 1/week)

Occasional Volunteer (periodically throughout the year)

Special Volunteer (provides a specific service on a one-time basis)

I certify that the information provided on this application is true and complete to the best of my knowledge, and agree that falsified information or significant omissions may disqualify me from volunteering in the schools.

I give authorization to Anderson School District Two to conduct an investigation into my background and understand that this is part of the requirement prior to becoming a volunteer. I understand that Anderson School District Two will not be responsible for any personal injury or property loss that may occur to me while performing volunteer services. I also understand that I will not receive any compensation from Anderson School District Two or any entity, group or individual for serving as a volunteer. I also understand that my service as a volunteer is conditional upon the District's receipt of a satisfactory background check and submission of a picture ID.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_