SADDLEBACK VALLEY UNIFIED SCHOOL DISTRICT
VOLUNTEER II FORM

Volunteer Form II applies to:

- Volunteers with more than limited contact with students (mentors, paraprofessional counselors, Kids Run OC, etc.)

The Saddleback Valley Unified School District would like to express its appreciation for your willingness to be a volunteer. The practice and policy of the Saddleback Valley Unified School District is to screen all volunteers on the school premises.

Please print the information requested below:

_____ _____ _____

Name (Last, First, Middle) Date of Birth ID # (ID, CDL, Passport)

_____ (_____)_____

Address (Street, City, Zip) Phone #

_____ _____ _____

School Site Student Name (if applicable) Email (required)

Screening Required:

- Must show a valid picture ID (CA ID or Passport)
- Fingerprints to conduct a criminal background check
- TB Risk Assessment
- Complete Online Mandated Trainings:
    - Sexual Harassment Training
    - Mandated Reporter Training
    - Bloodborne Pathogen Training

Volunteers with more than limited contact with students are fingerprinted for a criminal background check to determine if they have been convicted of a violent or serious felony. Board Policy on the Saddleback Valley Unified School District website.

In addition, the District requires that these volunteers present a certificate of being free of active tuberculosis by completing the TB Risk Assessment form with a signature/stamp from a medical provider. **Volunteers may not begin an assignment until the approval has been given by Human Resources.**

Again, thank you for your willingness to serve the District as a volunteer.

_____ _____

Signature of Principal Date

I understand that volunteers are not compensated, and that I may only provide assistance under the direction and supervision of an employee of the Saddleback Valley Unified School District.

I understand that my volunteer services are at the discretion of the Board, through its designee, the site Principal, and that my services may be terminated at any time.

_____ _____

Signature of Volunteer Date

(Revised 12/2025)