School Staff: Please return completed forms to the Site Secretary along with a copy of the volunteer's driver's license.

## **Murrieta Valley Unified School District**

Prior to working with students, all adults who wish to volunteer at district schools are required to complete this volunteer registration form and **return it to the school office (site secretary) along with a copy of their current driver's license**. To protect the safety of students, District Support Center staff will check the Department of Justice's Megan's Law web site to verify that persons who wish to volunteer are not required to register as a sex offender pursuant to Penal Code 290.

Volunteers who work four or more hours per week in close contact with students shall be required to provide evidence of an examination within the last four years to determine that he/she is free of active tuberculosis. Volunteers may be exempt from the tuberculosis testing requirement if they serve less than a school year, or their volunteer functions do not require frequent or prolonged contact with students.

<u></u>		Volunteer Reg	aistrati	on Form		
		Volunteer's				
School:				_School Year:		
Name:				1 1		
(First)	(Middle)	(Last)		Date of Birth		
Address:						
(Number)		(Street)		(Apt. #)		
(City)		(State)		(Zip)		
Murrieta Valley Unified S	School District, its Board	of Trustees, officers	, agents a	gulations and school rules. and employees, individually e from or during my volunte	and collectively, f	
			Γ	For Office Use Only:	Revised 6/2	28/10
Volunteer's Signature		Date	_	Checked By:	Date:	
Prior to working with stu	Murrie	ta Valley Un	ified S	chool District  Is are required to complete	this volunteer reg	gistration form
	staff will check the Depa	rtment of Justice's M	egan's La	r current driver's license. w web site to verify that pe		
within the last four years	to determine that he/sh	e is free of active tub	erculosis	ts shall be required to prov Volunteers may be exem to not require frequent or pr	pt from the tuberc	ulosis testing
		Volunteer Req				
School:				School Year:		
Name:				1 1		
(First)	(Middle)	(Last)		Date of Birth		
Address:						
(Number)	(	(Street)		(Apt. #)		
(City)		(State)		(Zip)		
Murrieta Valley Unified S	School District, its Board	of Trustees, officers	, agents a	gulations and school rules. and employees, individually e from or during mv volunte	and collectively, f	
			[	For Office Use Only:	Revised 6	6/28/10
Volunteer's Signature		Date	_	Checked By:	Date:	