

# Seguin Independent School District

## Volunteer or Student Teacher Clearance Addendum

School Year \_\_\_\_\_

Any adult who is interested in volunteering and going on field trips must complete this form each school year. Please allow 3 days for processing.

**Example:** Mother and Father would fill out this form separately.

The Seguin ISD is required by policy to obtain information on all persons volunteering in the district.

**Each section must be completed**, failure to do so may result in an individual being omitted from the volunteer list.

### **LIST ALL CHILDREN AND CAMPUSES: (PLEASE PRINT)**

**Student Name:**

**Student Campus/Organization:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **VOLUNTEER INFORMATION: (PLEASE PRINT)**

**Full Name:**

\_\_\_\_\_  
Last First Middle

**Address:**

\_\_\_\_\_  
Street City Zip Code

**Volunteer's**

Date of Birth: \_\_\_\_\_  
Month Day Year Phone Number E-Mail Address

**SEX:** Male  Female  **SISD EMPLOYEE:**  Yes  No

- Ethnicity:**
- African American** (but not of Hispanic origin)
  - White** (but not of Hispanic origin)
  - Hispanic:** All persons of Mexican, Puerto Rican, Cuban, Central and South American or other Spanish culture or origin regardless of race.
  - Asian or Pacific Islander**
  - Other**

**Drivers License or I.D. #** \_\_\_\_\_ **State** \_\_\_\_\_ **Social Security #** \_\_\_\_\_

**Relationship to Student** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Today's Date** \_\_\_\_\_

### **Office Use Only**

**Campus Code:** \_\_\_\_\_ **Teacher/Room:** \_\_\_\_\_

### **Human Resources Department Use Only:**

**Date Processed:** \_\_\_\_\_ **Status:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE:** Smaller children are **NOT** allowed to accompany parents on field trips.

Revised: 05/15/2013