



NORTH ROSE - WOLCOTT CENTRAL SCHOOL DISTRICT

11631 SALTER-COLVIN ROAD WOLCOTT, NEW YORK 14590 P. 315.594.3141 F. 315.594.2352

Robert D. Magin
Assistant Superintendent
for Business and Operations

Michael L. Pullen
Superintendent of Schools

Megan C. Paliotti
Assistant Superintendent
for Instruction and School Improvement

Volunteer Renewal Form

Thank you for serving as a volunteer with the North Rose-Wolcott Central School District in the past. Volunteer applications are valid for the school year in which the volunteer was approved. If you wish to serve as a volunteer at this time, please complete, sign, and return this form to:

c/o Jan McDorman
11631 Salter-Colvin Road
Wolcott, NY 14590

Today's Date: _____ Current School Year: _____ Building/Department to Volunteer: _____

Email Address: _____

Salutation (Mr., Mrs., etc.): _____ Name: _____

Phone Number: (_____) _____ - _____ Address: _____

Have you ever been convicted of a crime? (felony or misdemeanor) Yes No

If yes, please explain: _____

What services are you willing to perform? _____

School Year(s) you served as a volunteer: _____

Please provide a short description of the way(s) you have served as a volunteer with the North Rose-Wolcott Central School District: _____

Emergency Information-In case of emergency, please notify:

_____ (_____) _____ - _____

(Name)

(Address)

(Phone)

Disclaimer: Submission of this Volunteer Renewal Form serves as an acknowledgment that you will comply with the Confidentiality Agreement for School Volunteers (Board Policy 3150F.1) signed at the time of your initial application. A copy of this policy is available at any time on our website: www.nrwcs.org.

Signature: _____ Date: _____

Approved By: _____

Approved: _____

Not Approved: _____