

**LOWELL PUBLIC SCHOOLS
LOWELL, MASSACHUSETTS**

APPLICATION FOR VOLUNTEER SERVICES

At which school(s) do you wish to volunteer?

LOWELL HIGH SCHOOL BAND

Name _____
Last First Middle

Address _____

Contact Telephone # _____

What is your relation or connection to the school: _____

VOLUNTEER SERVICES TO BE CONSIDERED FOR (Check all that may apply):					
<input type="checkbox"/>	Student/Partner Reading	<input checked="" type="checkbox"/>	Field Trip Chaperone	<input type="checkbox"/>	PTO sponsored events
<input checked="" type="checkbox"/>	Classroom Helper	<input checked="" type="checkbox"/>	Overnight Chaperone	<input type="checkbox"/>	Book fair
<input type="checkbox"/>	Library Assistance	<input type="checkbox"/>	Office Helper	<input type="checkbox"/>	Book swap
<input type="checkbox"/>	Lunch Room Assistance	<input type="checkbox"/>	Field Day	<input type="checkbox"/>	School Store
<input checked="" type="checkbox"/>	OTHER	LHS BAND PARENT VOLUNTEER			

REFERENCES

1. Name _____ 2. Name _____
 Position _____ Position _____
 Telephone # _____ Telephone # _____

The Personnel Office will contact your listed references for the purpose of verifying recommendations relating to your volunteer application.

The Lowell Public Schools will also be conducting a criminal record check for conviction and pending case data. Please complete the attached **CRIMINAL OFFENDER RECORD INFORMATION (C.O.R.I.) FORM**. The information contained herein is a true and complete statement of my personal record to date.

Signature of Applicant _____ Date _____

I also acknowledge that I have received the **DRUG FREE WORKPLACE** Policy as adopted by the Lowell School Committee on May 10, 1989 and that I have read this document.

Signature of Applicant _____ Date _____

" It is unlawful in Massachusetts to require or administer a lie-detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability."

Please return to	Susan Duggan, Assistant Superintendent For Personnel & Recruitment Lowell Public Schools 155 Merrimack Street, Lowell, MA 01852
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DRUG FREE WORKPLACE

FEDERAL LAW SPECIFIES THAT SCHOOL DISTRICTS WHICH ARE RECIPIENTS OF FEDERAL FUNDS MUST MEET THE REQUIREMENTS OF THE DRUG-FREE WORKPLACE ACT OF 1988. IN ORDER TO MEET THESE REQUIREMENTS IN COMPLIANCE WITH THIS ACT, THE LOWELL SCHOOL COMMITTEE HAS ADOPTED THE FOLLOWING POLICY:

1. The unlawful manufacture, distribution, possession or use of a controlled substance is prohibited, whether or not on school property or while engaged in school business.
2. Violation of laws relative to manufacture or distribution of controlled substances, whether or not on school property or while engaged in school business shall result in suspension and termination proceedings for any convicted employee.
3. Violation of laws relative to possession of controlled substances, whether or not on school property or while engaged in school business shall result in suspension and may result in termination of the employee.
4. An employee convicted of possession of a controlled substance may be offered the opportunity to participate in an approved program of rehabilitation. The Lowell School Department may also allow the employee to resume duties at a point in the program where the approved rehabilitation agency, the Lowell School Department and the employee agree that the resumption of duties would not be affected by the employee's chemical dependency. The Lowell School Department may require a convicted drug user to submit to and allow release to the School Department the results of blood and/or urine tests to determine that the employee is remaining free of illicit chemicals.
5. A second arrest for violation of the controlled drug statutes shall result in further suspension and institution of suspension proceedings by the Lowell School Department.
6. All employees, as a condition of employment, must agree to the terms of this policy statement and are required to report, in writing, to the Superintendent of Schools, any controlled substance conviction arising from any incident in the workplace.
7. The Lowell School Department maintains a Substance Abuse Awareness Resource facility at Lowell high School all employees are encouraged to learn about substance abuse and related problems by reading materials and consulting with staff members at the facility. In-service programs are also offered by the School Department and are available to all employees.
8. Employees who believe that they may have a substance abuse problem, whether with alcohol or with other drugs, are encouraged to seek assistance from a counseling agency. Confidential referrals to such agencies may be made through the Drug Program Education Program Office at 937-8938.

THIS POLICY WAS ADOPTED BY THE LOWELL SCHOOL COMMITTEE ON MAY 10, 1989.



Lowell Public Schools
Henry J. Mroz Administration Office
 155 Merrimack Street
 Lowell, Massachusetts 01852

Applicant Affidavit

Have you ever been convicted of a criminal offense? Yes No

Under Massachusetts Law, you may answer "no" if any of the following circumstances are applicable:

1. An arrest that did not result in a conviction;
2. A first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace;
3. Any conviction of a misdemeanor where the date of such conviction or the completion of any period of incarceration therefrom (whichever is later) occurred five or more years prior to the date of this questionnaire, unless you have been convicted of any offense within five years immediately preceding the date of this questionnaire;
4. Your conviction record has been sealed pursuant to Massachusetts Law;
5. You have juvenile delinquency or child in need of services complaints which were not transferred to Superior Court for prosecution.

Date	Place or Court	Charge	Details

Are you now under charge for any criminal offense on which you are awaiting trial or final disposition? Yes No

I certify that the answers given by me to the foregoing questions and statements, and the facts contained in this application, are true and complete and I understand and agree that any misrepresentation, omission of fact, or the giving of false or misleading information, by me in this application or at my interview, if any, will be sufficient cause for cancellation of this application and/or dismissal from employment, if I have been employed.

Signature _____ Date _____

Schools of Choice