



Have you ever been convicted of a crime? Yes No

Have you ever been disciplined or fired from an organization? Yes No

Have you ever resigned from employment rather than face dismissal? Yes No

Please explain any "yes" answers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**References:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I have read and I understand the volunteer application and I affirm that all statements and answers are true and accurate. I have been advised and understand that if I have represented, that I do have a pending criminal charge or conviction in any jurisdiction in or outside the State of New York, I may be asked and hereby agree to provide additional information concerning the charge and/or conviction. I also understand that the District may seek additional information from third parties, and I hereby authorize any third parties to provide the District with such information as it may request on this subject. I agree that a photocopy of this authorization may be accepted with the same authority as the original. I hereby waive and release all third parties, including all persons and institutions and other organizations, from any liability arising from the disclosure of any such information, whether in writing or orally, and further waive and release the District from liability arising from the gathering of the aforementioned information, or the use, publication or retention of such information.

Signature of Applicant: \_\_\_\_\_ DATE: \_\_\_\_\_

**Olean City School District Use Only**

School \_\_\_\_\_ Date \_\_\_\_\_ District Office Review by \_\_\_\_\_ Date \_\_\_\_\_

Assignment \_\_\_\_\_ Ref. Checked by \_\_\_\_\_ Date \_\_\_\_\_

**Approved by**  
Principal/Designee \_\_\_\_\_ Date \_\_\_\_\_ Bkgr. Checked by \_\_\_\_\_ Date \_\_\_\_\_