

Dear CCS volunteer,

Thank you for your willingness to volunteer your time to work with our students!

Attached to this letter is the Volunteer Application form. This application needs to be completed once per school year so that a background check may be done. Return the application in a sealed envelope addressed to my attention for the Junior/Senior High Campus and to Debra Sanderson at the Elementary Campus.

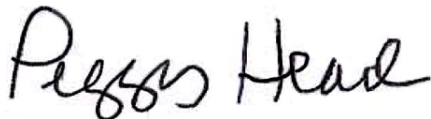
I will process the application and an e-mail will be sent to you from message@mobilizebyministry.com with a link to the video that must be viewed. There is a test at the end, and then I am automatically notified that you have completed the process. You only need to watch the video once. The video may take up to two hours to complete, so allow extra time.

I have created a spreadsheet that all teachers have access to and once you complete the process they can see that you are ready to volunteer.

For questions relating to specific field trips, please contact the teacher in charge.

If you have questions about completing the volunteer process, I will be happy to assist.

For His children,



Mrs. Peggy Head
Cincinnati Christian Schools
(513) 892-8500 ext. 1011
peggy.head@cincinnatichristian.org

Elementary Campus

7350 Dixie Highway, Fairfield, OH 45014 | Phone 513.874.8500 | Fax 513.874.9718

Junior/Senior High Campus & Administrative Offices

7474 Morris Road, Fairfield, Ohio 45011 | Phone 513.892.8500 | Fax 513.892.0516



Volunteer Application

This application is to be completed at the beginning of every school year by all applicants for any volunteer position within Cincinnati Christian Schools (CCS) involving the supervision or custody of minors. The video that is connected to this policy must only be viewed once. By completing this application, you are affirming that you have read and are personally committed to the written philosophy of education, mission, vision, and core values of CCS.

General Information:

Date _____

Name _____

Address _____

City/State _____ zip _____

Home phone _____ Cell phone _____

*E-mail address _____ (*must be provided for processing)

Relationship to children attending CCS (if any) _____

Authorization for Criminal Records Check

I hereby authorize Cincinnati Christian Schools to request the release of any information which pertains to any record of convictions contained in law enforcement files or in any criminal file maintained on me whether local, state, or national.

Applicant's signature _____

Print name (including print maiden name if applicable) _____

*Date of birth ____/____/____ Place of birth _____

*Social Security Number _____ (*cannot be processed without this)