

# Millennium Community School



## **VOLUNTEER PROGRAM**

### **WELCOME AND INFORMATION PACKET**



*We Grow Kids!*

3500 Refugee Road, Columbus, OH 43232

614-255-5585 (Phone)

614-255-5580 (Fax)

[www.2kschool.com](http://www.2kschool.com)

***Mission:***

*Millennium Community School is committed to achieving excellence by providing high standards of academic, social and emotional growth.*

# - Volunteer Welcome Letter -

*“Millennium Community School Cares by Making a Difference in Students’ Lives”*

On behalf of the Millennium Community School Board of Directors, we welcome you, and are delighted that you have offered your time and services. Your services are essential in helping our school and students meet our mission, vision and goals.

Volunteers are invaluable to the education community and their services are always apparent during times of need!

Our volunteers have supported many student activities, PTA events, family and community projects, and other school relative initiatives throughout the years.

As members of the Millennium Community School Board, it is our goal to make sure that your time with us, is enjoyable, insightful, but most of all, rewarding.

If you are ever in need of assistance or need questions answered during your time here, our staff is always on hand and more than willing to help you.

We hope that your experience with Millennium Community School will be a beneficial one.

Thank you for your services,

Millennium Community School  
*Board of Directors*

***Kevin Harris, Jr., President***

***Manika Williams, Secretary***

***Tonya Sapp, Treasurer***

***Timothy Davis***

# **Important Information You Should Know**

*“We Are Helping Students to Meet Their Academic Goals”*

## **Application Process**

- Volunteers must fill out an application, complete a background check (BCI & FBI) (returned results will determine your eligibility)
- Sign a Statement of Non-Guilty/Conviction Form
- Review the ORC Prohibited Offenses List
- Provide 3 (Three) Character References
- Sign-in and out, record your daily service hours, and wear a name badge during your volunteer service hours. All volunteers will be required to check-in at the front office.

## **Scheduling**

- Volunteers will receive assignments from the school administration and service hours will be determined in conjunction with the volunteer’s available schedule and the administration.

## **Dress Attire**

- Volunteers will dress as you would in any professional setting, unless stated otherwise by the administration.

## **Communication**

- Volunteers who have questions regarding their service hours or need additional information, should contact the school administration. Any school or student related questions should be addressed by the administration.

*You are welcome to email us at our website address ([www.2kschool.com](http://www.2kschool.com)), and a school administrator will follow-up with you regarding your questions, comments or concerns*

# Volunteer Application Form

## MILLENNIUM COMMUNITY SCHOOL

**CONTACT INFORMATION**

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Email address \_\_\_\_\_

Contact Info \_\_\_\_\_ home cell work

**Medical Emergency Contact**

Name	Relation	Number

**What are your talents, skills and/or experience?**

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Indicate Availability	Monday	Tuesday	Wednesday	Thursday	Friday
Time (s) a.m./p.m.					

**Why are you interested in volunteering at Millennium Community School? \_\_\_\_\_**

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**What area(s) are you interested in?**

**Front Office \_\_\_\_\_**

**Sports Program \_\_\_\_\_**

**Events/Projects \_\_\_\_\_**

**Nurse's Office \_\_\_\_\_**

**School Fundraisers \_\_\_\_\_**

**Technology/IT \_\_\_\_\_**

**Teacher/Classroom \_\_\_\_\_**

**Other: \_\_\_\_\_**

## **Volunteer Requirement Letter**

### **MILLENNIUM COMMUNITY SCHOOL**

As part of the volunteer process, each individual is subject to certain requirements before an application can be approved. This information is provided under the application process in the packet.

Millennium Community School has an obligation to parents, by making sure that we provide their children with a safe environment. We understand our role, and maintaining student integrity is of great importance to us. We are committed in every way, to instill confidentiality in this process, for our students, parents and the community.

Millennium Community School has a policy standard that each employee and volunteer is eligible to work in a student environment. It is also a mandate of the State of Ohio/Ohio

Department of Education that background checks be conducted during the initial process and each year, thereafter.

In addition to the required background checks, we request that each individual complete and sign a Statement of Non-Guilty/Conviction form. Included with the Statement of Non-Guilty/

Conviction form is a list of Prohibited Offenses. We ask that you review this information very carefully before you began the application process. The Prohibited Offenses listed are under the Ohio Revised Code/ORC: 2903.

Again, any information that we request and retain is used solely to determine your eligibility to work with our students.

Finally, in order to complete the application process, each individual will be required to provide three (3) Character References.

Thank you for your interest in Millennium Community School.

# **STATEMENT OF NON-GUILTY/CONVICTION FORM**

## **Section A:**

### **Non-Guilty Non-Conviction Statement**

I hereby attest that I have never been convicted of or pleaded guilty to crimes set forth in division (A) (8) or (A) (9) of section 109.572 or division (A) (1) of section 5104.09 (see Prohibited Offenses list) of the Ohio Revised Code or an existing or former offense of any municipal corporation, this state, or any other state that is substantially equivalent to any of these offense.

I attest that no child has been removed from my home as described in section 2151.353 of the Revised Code.

<b>Name (please print)</b>	
<b>Address</b>	
<b>Signature</b>	<b>Date</b>

**Section B:**

**Convicted/Rehabilitated Statement**

I hereby attest that I have been convicted of a crime set forth in division (A) (8) or (A) (9) of section 109.572 or division (A) (1) of section 5104.09 (see Prohibited Offenses list) of the Ohio Revised Code or an existing or former offense of any municipal corporation, this state, or any other state that is substantially equivalent to any of these offense.

I attest that no child has been removed from my home as described in section 2151.353 of the Revised Code.

Name (please print)	
Address	
Signature	Date

**By attesting to this statement the Ohio Department of Education may investigate and confirm**

**I have reviewed the rehabilitation requirements of rule 3301-20-01 of the Administrative Code, and have determined that the employee meets the rehabilitation requirements.**

Superintendent/Director Name (please print)
Superintendent/Director Signature



**Date**