

NORTH END SCHOOL VOLUNTEER

FINGERPRINTING REQUEST

RETURN THIS FORM TO THE NORTH END SCHOOL MAIN OFFICE. ONCE SUBMITTED, YOU WILL RECEIVE AN EMAIL FROM THE SUPERINTENDENT'S OFFICE WITH DIRECTIONS FOR FINGERPRINTING. YOU WILL BE REIMBURSED AND FINGERPRINTS ARE GOOD FOR 10 YEARS. PLEASE ONLY COMPLETE THIS FORM IF YOU INTEND ON VOLUNTEERING AT NORTH END MORE THAN 3 TIMES DURING SCHOOL YEAR.

PLEASE PRINT

PARENT #1 NAME: _____

PARENT #2 NAME: _____

STUDENT'S NAME: _____

PARENT #1 CELL/PHONE _____

PARENT #2 CELL/PHONE _____

STREET ADDRESS: _____

CITY, STATE, ZIP _____

EMAIL ADDRESS (PARENT#1) _____

(PARENT #2 _____

PLEASE RETURN COMPLETED FORM TO THE MAIN OFFICE AT NORTH END SCHOOL (mail to 122 Stevens Ave or email Mrs. Sinisi (sinisi.vickie@cgschools.org))

THANK YOU FOR VOLUNTEERING!