Thank you for your interest in volunteering at one or more of our KPBSD schools. If you are a <u>Returning Volunteer</u> read the instructions below to reactivate your volunteer application.

## **Returning Volunteer**

To begin, click on "Returning Volunteer," then enter your email address and password from your existing online volunteer application.

		Fields p	receded by a red asterisk (🕷	) are required.		
Plea	se enter a	I required inform	mation.			
Plea	se enter y	our FULL MID	DLE NAME.			
Name:	~					
	(Title)	🐐 (First)	₩ (Middle Name)	🐐 (Last)	(Suffix)	
Other na	ame under	which transcrip	ots, certificates, and former a	pplications may be list	ed:	
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Page 2: Current Employment Status (KPBSD Employee Transfer Status)- read the questions and answer appropriately.

Please enter all required information.		
Are you currently employed by the Kenai Peninsula Bo list?	brough School District (KPBSD) under the qualifying	
Certified Contract Teachers, Administrators, or Suppor	rt Personnel working under a Personnel Action Form	
Select "Yes":	reisonner working under a reisonner Action Form.	
Select Yes : A KPBSD administrator applying for an administrative ( A KPBSD teacher apply for a teacher position. A KPBSD support employee applying for another suppr		
f the categories above to not apply to you, select "No	D.″	
● No ○ Yes		
KPBSD employees include Certified Contract Teach under a Personnel Action Form. All other applicant Substitutes, Co-Curricular (Coaches), Lifeguards, e		
This selection determines what application pag- reviewed. If you are uncertain of your current e Peninsula Borough School District.		
age 2: Enter Address, Then	click the	
age 3: Enter Address. Then	n click the Next Page	
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-	click the Next Page	
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Fields pre		
Fields pre	eceded by a red asterisk (*) are required.	
Fields pre	eceded by a red asterisk (*) are required.	
Fields pre	s	
Fields pre Please list your mailing address, Permanent Address Number & Street:	s Present Address	
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Fields pre	s Present Address Number & Street: Apt. Number: City:	
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Fields pre	s Present Address Number & Street: Apt. Number: City: State/Province: Zip/Postal Code:	
Please list your mailing address.     Permanent Address Number & Street:     Apt. Number:     City:     State/Province:     Zip/Postal Code:     Country:	Acceded by a red asterisk (*) are required.	

## Page 4: Vacancy Desired

Scroll down to "Volunteer Screening Process." Select JobID 8131.

	Volunteer Screening Process
•	Volunteer Screening Process JobID 8131: Volunteer 2021-22 Location: Districtwide

You will be asked how many years of experience you have in similar positions, select an option from the drop down box.

How many years of experience do you have in similar positions?	30+ years	) ~

Page 5: Position Desired- If you are interested in future openings, please check the positions in which you are interested. \* The more positions you select, the longer your application will become. \* Click the "Next Page" button.

Page 6: Public information. Click the "Next Page" button.

Page 7: Family Educational Rights and Privacy Act (FERPA). Click "I agree" at the very bottom.

🍍 🗹 I have read and agree to the Family Educational Rights and Privacy Act, KPBSD BP 4119.23, BP 4219.23, and BP 4319.29 listed above.

Click the "Next Page" button.

Page 8: Volunteer Areas of Interest- \*This is where you can get specific in location, however this portion of the application is optional. \* All other fields on this page are <u>required</u> for submission. Click the "Next Page" button.

Page 9: Volunteer Confidentiality Statement- Click all "I agree" buttons. Click the "Next Page" button.

Page 10: Volunteer Minor Consent Form- If applicant is age 17 or younger you will need consent from your parent/legal guardian to volunteer in the Kenai Peninsula Borough School District. Click the "Next Page" button.

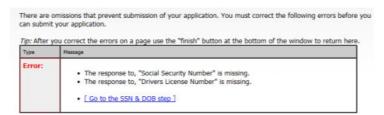
Page 11: Social Security Number (SSN) and Date of Birth (DOB)- In order for KPBSD to process your background check in a timely manner, the information you provide must be accurate. (ex. Your name and date of birth entered on your application must match the information typed on your driver license.) Click the "Next Page" button.

Your social security number and data to obtain background checks.	ate of birth will remain confidential and will only be
you provide must be accurate. (ex.	kground check in a timely manner, the inform Your name and date of birth entered on your ation typed on your driver license.)
🏶 Social Security Number	
Date of Birth (please enter in the foll MM/DD/YYYY)	owing format:
🟶 Driver's License Number	
🏶 Driver's License State	

Page 12: 2021-22 Disclosure Background Investigation- click "I agree" and "Click to Digitally Sign." Click the "Next Page" button.

Page 13: Legal Information. Click the "Next Page" button.

Page 14: Confirmation- If you did not complete a field an error message will appear with a link to the page for you to correct the error.



If no errors are present, click on "Submit Application."

A confirmation email will be sent to the address you specified on page 1.