

Radnor Township School District

Administration Building • 135 South Wayne Avenue, Wayne, PA 19087-4117 Phone: 610-688-8100 • Fax: 610-386-6135

| Demographic Information (Please print legibly) | |
|---|--|
| Name | Home Phone |
| Address | Cell Phone |
| City, State, Zip | E-mail |
| Volunteer-School | Independent Contractor (Service being provided) |
| Volunteer-Coach | Other |
| (Sport) | NTS DEALIDED |
| | INTS REQUIRED es Office prior to commencement of assignment) |
| Service code for Independent Co or signed affidavit (affidavit not accepted for reside contractor) Proof of vaccination (optional) Act 126 Mandated Reporter Training (required for o Act 168 Commonwealth of PA Sexual Misconduct A you had direct contact with children) (Independent C Tuberculosis Test (less than 3 months old) (Voluntee) | h IdentoGO): https://uenroll.identogo.com GGZJ (PA Dept. of Human Services) ontractor: 1KG6XN (PA Dept. of Education) ents of 10 years or less; overnight trips; volunteer coach or independent overnight trips) http://www.reportabusepa.pitt.edu/ (free online course) Abuse Disclosure Release Form (one for current employer and any that Contractor only) |
| Name | |
| | |
| Relationship | Relationship |
| Telephone Image: Cell Home Work Cell Personal contact information is shared with administrative state necessary. Cell | Telephone Image: Home Image: Work Cell aff (i.e. direct supervisor) by the Human Resources Office when |
| I understand that failure to supply the required documentation being excluded from all activities related to the above position | n prior to the commencement of this assignment would result in my n until I have fulfilled this requirement. |
| Signature | Date |
| | |