



Office of the Director of Curriculum, Instruction and Assessment
HANOVER PARK REGIONAL HIGH SCHOOL DISTRICT
Serving East Hanover Township, Florham Park Borough and Hanover Township



Carol Grossi
Superintendent of Schools
Maria Carrell
Director of Curriculum, Instruction and Assessment

75 Mt. Pleasant Avenue
East Hanover, New Jersey 07936
Office – (973) 887-0320
Fax – (973) 887-9247

Tier 2 (fingerprints required)

Dear Volunteer:

Thank you for applying for a volunteer position within the Hanover Park Regional High School District. In order to be approved for a volunteer position, necessary paperwork is to be completed by all Hanover Park Regional High School District volunteers as required by the State and the district's Board of Education.

Please read all information below before scheduling your appointment and completing the required paperwork:

1. See attached [Criminal History Record Check](#) instructions. The cost to be fingerprinted is \$21.91 plus an \$11 administrative fee. Methods of payment are Visa, MasterCard, American Express or Discover credit cards.
2. Complete the attached Volunteer Application .
3. Complete the attached "In Case of Emergency" form.
4. Provide documentation of a Mantoux Test within the previous six months.
5. Complete and sign the attached Waiver and User Agreement.
6. Complete the online Harassment, Intimidation & Bullying training provided by Safe Schools. You will be given the website and a user name to login after your application is received.
7. Upon obtaining your fingerprints **and** completing steps 1-6, please bring the following to the Board of Education offices:
 - a. Volunteer Application.
 - b. "In Case of Emergency" form.
 - c. Waiver and User Agreement.
 - d. Mantoux Test documentation.
 - e. The IndentoGO form and receipt indicating completion of fingerprinting.
 - f. CPR Certification (required for athletic volunteers only).
 - g. Harassment, Intimidation & Bullying certificate indicating course completion.
8. The Criminal History Review Unit will send your criminal history clearance letter directly to your home. The Board Office does not receive a copy. Upon receipt, please provide a clear hard copy (showing the center seal) of your criminal history clearance letter to the Board Office.

Your appointment as a district volunteer will require recommended approval by the Board of Education. You cannot have any contact with students until you have completed steps 1-8 **and** have been approved by our Board of Education.

For processing of paperwork, please contact Suzanne LaRicca at the Board Office 973-887-0320 ext.2270.

Criminal History Instructions for New Applicants

1. Access the Office of Student Protection's direct web address to begin the process. Click on [Office of Student Protection](#). Click on *"File Authorization and Make Electronic Payment."*
2. Select the first option: *"New Administration Fee Request (New Applicants Only)"* and enter your Social Security number to ascertain if you are eligible for the process. The screen displays four (4) options as to the job position(s) and employer. Please select the appropriate option and proceed to next screen.

All Job Positions, except School Bus Drivers and Bus Aides, for Public Schools, Private Schools for Children with Disabilities and Charter Schools

All School Bus Drivers and Bus Aides for Public Schools, Private Schools for Children with Disabilities, Charter Schools and Authorized School Bus Contractors

All Job Positions, except School Bus Drivers and Bus Aides, for Non Public Schools

All School Bus Drivers and Bus Aides for Non Public Schools and Other Agencies

3. Complete the requested applicant information to include the county, district, school or contractor code names and proceed to the Legal Certification. In order to continue with the ePayment process, read and accept the terms of the Applicant Authorization and Certification form by checking the box.

Job Category: ex. Volunteer

County: Morris (27)

District: Hanover Park Regional High School District (1990)

4. Please complete the required payment information (\$66.05). There is a \$10.00 administrative fee for the department to process the request and issue an approval letter. There will also be an additional \$1.00 convenience fee charged by the private vendor, NicUSA for processing the credit card information. Methods of payment are Visa, MasterCard, American Express or Discover credit cards.

You must click the *"Make Payment"* button only one time to complete the transaction.

5. After completing the transaction, you will be presented with three required steps:
 1. View and/or print your New Administration Fee Payment Request confirmation page
 2. View and/or print your IdentoGO NJ Universal Fingerprint Form
 3. Click here to schedule your fingerprinting appointment with Idemia
6. Select the first option *"View and/or print your New Administration Fee Payment Request confirmation page"* and print a copy of the receipt by clicking the print button in the upper right corner of the page and presenting a copy to the employing entity.
7. Next select the second option *"View and/or print your IdentoGO NJ Universal Fingerprint Form."* You must print the IdentoGO NJ Fingerprint Form to use when making your fingerprint appointment and to present it to Idemia at the time of LiveScan fingerprinting.
8. Access the Idemia web page by selecting the third option *"Click here to schedule your fingerprinting appointment with Idemia"* or calling 1-877-503-5981 to schedule a fingerprinting appointment. Effective February 17, 2020, you must use the chart below to choose your Service Code to schedule the appointment.

REASON FOR FINGERPRINTING (Box 4 on the NJ Universal Fingerprint Form)	SERVICE CODE
PUBLIC SCHOOL EMPLOYMENT	2F1FBI
NONPUBLIC SCHOOL EMPLOYMENT	2F19ZQ
SCHOOL BUS DRIVER EMPLOYMENT	2F1GSH
SCHOOL BOARD MEMBER/TRUSTEE	2F1GN4
DOE VOLUNTEER	2F151N
DOE VOLUNTEER NONPUBLIC	2F14XX

9. In about two weeks after you get fingerprinted, you will be able to view and print your *"Applicant Approval Employment History"* by accessing the Office of Student Protection website. Give a copy to your employer.



HANOVER PARK REGIONAL HIGH SCHOOL DISTRICT

Serving East Hanover Township, Florham Park Borough and Hanover Township



75 Mt. Pleasant Avenue East Hanover, NJ 07936

(973) 887-0320 (973) 887-9247 (fax)

Volunteer Application

Date: _____

Personal Data

Name: _____
Last First Middle Initial

Street: _____

City: _____

State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Other Phone: _____

Email Address: _____

Volunteer Position: _____

Under the direction of: _____

Volunteer Signature

Administrator in Charge Signature

Date

Date

Please return to:

Office of the Superintendent
Hanover Park Regional High School District
75 Mount Pleasant Avenue
East Hanover, New Jersey 07936

Hanover Park Regional High School District

Volunteer Emergency Form

(Please type and/or print clearly)

VOLUNTEERS: Emergencies such as sudden illness, injuries, etc., are bound to arise. It is important, therefore, that certain information be available. Please complete this form and return with your volunteer paperwork.

Name of Volunteer: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

Name: _____ Relationship: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

ALTERNATE CONTACT

Name: _____ Relationship: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

PHYSICIAN TO BE CALLED IN CASE OF EMERGENCY: OPTIONAL

Name: _____

Address: _____

Telephone: _____

IF ANY CHANGES SHOULD BE MADE IN THE ABOVE INFORMATION, PLEASE NOTIFY THE BOARD OFFICE OR YOUR BUILDING SECRETARY.

Waiver and User Agreement: Hanover Park Regional High School Board of Education

The Hanover Park Regional High School Board of Education could not administer the extracurricular and in-school programs it has without the generous support of volunteers like you who give your time our schools. Please take the time to review this waiver and release form the Board requires in connection with the Program you are volunteering to assist. We thank you for your generosity and time.

I fully understand and acknowledge that recreational and fitness activities have (a) inherent risks, dangers, and hazards and such exists in my use of any equipment and my participation in these activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that, could cause serious disability; (c) these risks and dangers may be caused by the negligence of the representatives, employees, or volunteers of Hanover Park Regional High School Board of Education, the negligence of the participants, the negligence of others, accidents, breaches of contract, or other causes; (d) by my participation in these activities, **I hereby assume all risks and dangers and all responsibility for any losses and/or damages whether caused in whole or in part by the negligence or the conduct of the representatives, employees, or volunteers of Hanover Park Regional High School Board of Education, or by any other person.**

In agreeing to volunteer, I acknowledge that certain injuries are possible. These include but are not limited to: Minor or major bone fracture, scrapes, abrasions, lacerations, head or body bumps, bruises, muscle, tendon, or ligament strains or sprains. These might be caused by: Slips, falls, and other gravity-related mishaps, overstraining, or exceeding physical limitations, human error, disregard for guidelines, rules, and standard practice, ignorance or inattention, and environmental hazard (splinters, chalk dust, etc.).

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend, and indemnify Hanover Park Regional High School Board of Education and its representatives, employees, and volunteers from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my participation in these activities. I specifically understand that I am releasing, discharging, and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the representatives, employees, and volunteers of Hanover Park Regional High School Board of Education.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE. IT IS MY INTENTION TO EXEMPT AND RELIEVE THE HANOVER PARK REGIONAL HIGH SCHOOL BOARD OF EDUCATION FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

Volunteer's Name (print) _____ Date of birth _____
Address _____
Phone Number _____

Volunteer's Signature _____
Date _____

Witness (school representative) _____

VOLUNTEER POSITIONS

TUBERCULOSIS SCREENING RECORD

Mantoux Test

Name: _____

Position: _____

Date Tested: _____

Date Read: _____

Reaction: _____

Signature of Health Official

Date

**Return this completed form to the Superintendent's Office as soon as possible.
Volunteering is contingent upon receipt of this completed form.**