# PENSACOLA STATE COLLEGE HUMAN RESOURCES OFFICE VOLUNTEER PACKET

Volunteer Name	
Student ID Number	
Department	
Department Supervisor _	

Note: Only *completed* packets for *volunteers* should be sent to Human Resources.

Revised 10/20/2015

# CRIMINAL BACKGROUND CHECKS / FINGERPRINTING PROCESS

Pensacola State College adopted an outsourced process for background checks for all new hires and volunteers since August 1, 2007. Instructions and guidelines are in the web document that employees will use to complete the background check.

All new hires and new volunteers must access the website to complete the background check process:

https://fingerprint.fadv.com/fpWebApp/webPages/module/home/redirect.jsf

USER NAME: penemp PASSWORD: Password1

This link may be accessed at the 'faculty & staff' link from the pensacolastate.edu site. Please reference the Board of Trustees' Policy, 6Hx20.1.036 (under Documents & Links) for further information.

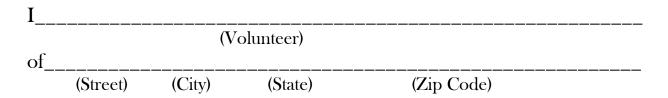
Questions may be directed to:

Tammy R. Henderson Director, Human Resources 1000 College Blvd. Pensacola FL 32504-8998

Office Phone: 850.484.1766 FAX: 850.484.1711 thenderson@pensacolastate.edu

10/20/2015

## PENSACOLA STATE COLLEGE VOLUNTEER WORKER GENERAL WAIVER



Hereby waive all liabilities, claims, demands and actions that may arise against The District Board of Trustees of Pensacola State College, Florida and / or it's trustees, officers, employees or agents related to my volunteer work. This relates to any loss, damage, or injury, including death that may be sustained, while in or on the premises of Pensacola State College or any premises leased to, used, or under the control or supervision of Pensacola State College or while enroute to or from such premises.

In signing this, I acknowledge that I have read this waiver, that I understand and acknowledge the significance and consequence of this waiver and that I am signing it voluntarily.

### ACKNOWLEDGEMENT OF CRIMINAL BACKGROUND CHECK

I agree to comply with the policies and procedures of Pensacola State College and will conduct myself in an appropriate and professional manner. I understand that I am required to submit to a criminal background investigation if I choose to volunteer within Pensacola State College.

Signature of Volunteer

Date

Signature of Parent (if volunteer is a minor)

Date

### PENSACOLA STATE COLLEGE VOLUNTEER WORKER APPLICATION

Name:		ID#		
Address	City	State	Zip Code	
Telephone:				
(H	Home)		(Work)	
I wish to volunteer my se	rvices to Pensac	cola State College	e in the following capacity:	
I can start volunteering or	n	, a	nd work as needed until further notice	
or until	My	approximate hou	urs are from	
until	ntil on the following days:			
			t receive any payment for my	
services.				
Volunteer's Signature			Date	
To be completed by the				
The volunteer will be ass	igned to work in	the following ca	pacity:	
			(Describe Capacity)	
The volunteer will work of	on the		Campus.	
Department/Cost Center	Assigned:			
Department Head's Signa	ature		Date	
Senior Administrator's S	ignature		Date	

#### PLEASE FORWARD THE COMPLETED FORM (ORIGINAL) TO THE HUMAN RESOURCES DEPARTMENT

(Rev. 3/14)