



**VIRGIN ISLANDS DEPARTMENT OF EDUCATION  
DIVISION OF HUMAN RESOURCES**

2133 HOSPITAL STREET  
CHRISTIANSTED, ST. CROIX, U.S.V.I. 00820  
TELEPHONE: (340) 772-3848 FACSIMILE: (340) 773-5844

**VOLUNTEER APPLICATION**

COPIES OF THE FOLLOWING DOCUMENTS ARE REQUIRED TO COMPLETE THIS SUPPORT STAFF EMPLOYMENT APPLICATION:

1. ONE(1) OF THE FOLLOWING PHOTO IDENTIFICATIONS  
VALID DRIVER'S LICENSE  
VOTER'S REGISTRATION  
U.S. PASSPORT
2. BIRTH CERTIFICATE AND SOCIAL SECURITY CARD
3. HIGH SCHOOL DIPLOMA or EQUIVELANCE
4. CERTIFICATES
5. RESUME
6. THREE (3) LETTERS OF CHARACTER REFERENCE
7. PHYSICIAN'S STATEMENT of GOOD HEALTH
8. CRIMINAL BACKGROUND CHECK (WILL NOT BE ACCEPTED IF SIX MONTHS HAS PASSED SINCE LAST CHECK)

**You must update your application every six (6) months to ensure that your file is kept active. Your failure to do so will result in your file being removed from our database in two (2) years.**

**VOLUNTEER APPLICATION (Page 1 of 6)**

**PART I: PERSONAL INFORMATION (Print all information in black ink)**

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MI

\_\_\_\_\_  
ADDRESS (P.O. Box)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip Code)

\_\_\_\_\_  
FORMER LAST NAME(S)

PHONE

\_\_\_\_\_  
(Home)

\_\_\_\_\_  
(Work)

POSITION YOU ARE APPLYING TO VOLUNTEER FOR \_\_\_\_\_

REFERRED BY \_\_\_\_\_

DATE YOU CAN START \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

1. Have you ever been convicted of any crime, excluding minor traffic violations?  
(Attach a copy of your Police Record) YES  NO
2. As a result of conviction by a court of law, were you fined, imprisoned, or placed on probation? YES  NO
3. Have you ever been dismissed for cause from a position involving students? YES  NO
4. Have you ever surrendered a work certification/credential/license/permit, or had one denied, revoked or suspended or is any investigation or adverse action now pending against you? YES  NO
5. Have you ever surrendered a teaching or other credential in any state, territory or foreign country? YES  NO

**NOTE:** If you answer “YES” to any of the above questions, you must attach a signed statement of explanation. Submit official copies of court or administrative record(s), including disposition of each case.

**VOLUNTEER APPLICATION (Page 2 of 6)**

**PART II: EDUCATIONAL BACKGROUND**

LIST THE NAMES OF COLLEGES OR UNIVERSITIES ATTENDED

Name of Institution	State	Major Field of Study	Years of Graduation	College Credit or Degree Awarded

PART III: DO YOU HOLD A VALID OR EXPIRED TEACHING CERTIFICATE?    YES     NO

\_\_\_\_\_ (specify state and type of certificate)

(Attach a copy of both sides of your certificate.)

**PART IV: STARTING WITH THE MOST RECENT, LIST TEACHING OR SERVICE EXPERIENCE**

Name of Company	Address	Job Title	Dates of Employment	Full-time/ Part-time

**PART V: MILITARY SERVICE/PEACE CORP SERVICES**

Inclusive Dates From                      To		Military Occupational Specialty	Branch of Service	Type of Discharge

**NOTE: Submit Copy of DD214**

**PART VI: PROFESSIONAL REFERENCES** - List three references. The references should be individuals who possess knowledge of your qualifications for the position(s) for which you are applying.

Name	Address	City/State	Telephone Number

**PART VII: PROFESSIONAL DEVELOPMENT ACTIVITIES** – List training activities or volunteer experiences which you consider significant features of your background. (Attach an extra sheet if necessary)

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**PART IX: STATEMENT OF HEALTH** - Do you have any health condition which you feel would restrict you from performing your duties for the position for which you are applying? Yes \_\_\_\_ No \_\_\_ If yes, on a separate sheet, describe the condition and explain work limitations.

**VOLUNTEER APPLICATION (Page 4 of 6)**

**COMPLETE THE CRIMINAL RECORD CHECK AUTHORIZATION FORM ATTACHED TO THIS APPLICATION.**

**AFFIRMATION** – I hereby affirm that the information given by me in this application for employment with the U.S. Virgin Islands Department of Education is true and complete to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission will be sufficient cause for disqualification or discharge if employed. **Also, by signing below, I hereby give the V.I. Department of Education authority to conduct a criminal as well as an employment history investigation.**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

**THE U.S. VIRGIN ISLANDS DEPARTMENT OF EDUCATION ADHERES TO THE POLICY THAT “NO PERSONS SHALL BE DISCRIMINATED AGAINST IN EMPLOYMENT OR IN ANY EDUCATIONAL PROGRAM OR ACTIVITY OFFERED BY THE VIRGIN ISLANDS DEPARTMENT OF EDUCATION ON ACCOUNT OF RACE, COLOR, CREED, NATIONAL ORIGIN, SEX, HANDICAP OR AGE”.**

*Information on this form is subject to release pursuant to the Freedom of Information Act.*

**VOLUNTEER APPLICATION (Page 5 of 6)**

**INVESTIGATION CONSENT, RELEASE OF LIABILITY AND AGREEMENT FORM**

**I CERTIFY, that I have never been convicted of a felony, a crime of moral turpitude, an offense involving the physical molestation, physical or sexual abuse or rape of a child and that I have never been the subject of a founded case of child abuse and neglect.**

Signature

**Making a materially false statement regarding these offenses is a misdemeanor. Such a conviction shall be grounds for the Virgin Islands Board of Education to revoke your teaching certificate. An Applicant who is unable to complete the above certification will not be considered for employment with the U.S. Virgin Islands Department of Education.**

1. I authorize the U.S. Virgin Islands Department of Education to make an investigation of any personal, educational, vocational or employment history. I further authorize any former employer, person, firm, corporation, educational or vocational institution, or government to provide the U.S. Virgin Islands Department of Education with information they have regarding my performance, character, and general reputation. I discharge the U.S. Virgin Islands Department of Education and those who provide information from any liability as a result of furnishing this information.
2. I identify that all statements and data provided are true and correct to the best of my knowledge. I agree that any falsification will constitute disqualification of my application or dismissal from employment from the U.S. Virgin Islands Department of Education.
3. I understand that any offer of employment is contingent upon the U.S. Virgin Islands Board of Education approval and an acceptable outcome of criminal records check. It is further understood that the criminal records check is conducted at my expense.
4. If employed, I understand that I shall serve successfully the prescribed probationary period during which time my suitability for the position will be determined.

**Print Name**

**Signature**

**Date**

**This completed application should be forwarded to the U.S. Virgin Islands Department of Education at either of the following addresses below:**

**U.S. Virgin Islands Department of Education  
Division of Human Resources**

**#2133 Hospital Street  
Christiansted, VI 00820  
Phone: (340) 772-3848  
Job Hotline: 1-866-LEARN88  
Fax: (340) 773- 5844  
Attn: Director of Human Resources**

**1834 Kongens Gade  
St. Thomas, VI 00802  
Phone: (340) 774-0100  
Job Hotline: 1-866-LEARN50  
Fax: (340) 774-2142  
Attn: Director of Human Resources**

## CONTRACTS/LICENSURE AND CRIMINAL RECORD

Answer each question yes or no. You must attach a copy of the court disposition or judge's sentencing order if you answered "yes" to question 1 or 2. You must attach supporting documentation and a written explanation if you answered "yes" to any of the questions below.

Failure to complete ALL of this section will result in your application not being considered.

1. Have you been convicted of or pled *nolo contendere* to any of the following, including but not limited to: murder, sexual or physical assault, rape, child molestation, kidnapping, manslaughter, extortion, sexual misconduct, with a minor, indecent liberties, incest, unlawful imprisonment, child abuse or neglect, abduction for immoral purposes, failure to secure medical attention for an injured child, pandering, crimes against nature involving children, malicious harassment, patronizing a juvenile prostitute, child abandonment, violation of a child abuse protective order, obscenity offenses, possession or distribution of drugs, arson, use of a firearm in the commission of a felony, child buying or selling, prostitution, felony indecent exposure, larceny, embezzlement or any of these crimes as may be renamed in the future?

\_\_\_\_\_Yes \_\_\_\_\_No

2. Have you been convicted of any felony or misdemeanor other than those listed above in question 1 or pled, *nolo contendere*, or are you now under investigation for any such offense, other than a minor traffic offence? For the purpose of this application DUID/DWIs must be reported.

\_\_\_\_\_Yes \_\_\_\_\_No

3. Have you resigned or been discharged from any position, including the Armed Forces, while under suspicion of having engaged in criminal, immoral, or unprofessional conduct, or are you now under investigation for any such charge?

\_\_\_\_\_Yes \_\_\_\_\_No

4. Have you ever surrendered a teaching certificate/credential/license/permit, or had one denied, revoked or suspended or is any investigation or adverse action now pending against you?

\_\_\_\_\_Yes \_\_\_\_\_No

5. Have you ever had any disciplinary action taken against you by a previous employer, including written reprimand, suspension, demotion, non-renewal, termination or any other form of disciplinary action?

\_\_\_\_\_Yes \_\_\_\_\_No