



Jenks Band Parents

CHAPERONE APPLICATION

Jenks Band Parents 205 East B Street, PO Box 425, Jenks, OK 74037

BOA Super Regional – Indianapolis, IN (October 15-18, 2026)

All applications must be submitted by Friday, Sept. 11th

If you are available on these dates and would like to accompany the band as a 'working' chaperone, we will be delighted to process your application. Thank you for offering your time, talents, and skills to enhance the education of our Jenks Trojan Pride Band students.

Applications may be scanned as a PDF and emailed to the following:

Band President - Mike Thomas kenny5494@yahoo.com

Chaperone Coordinator - Scott Davenport scottdavenport@cox.net

* Please **complete all pages of the form**. Incomplete forms will not be accepted for processing.

* Please be aware that a criminal background check may be performed. We provide this service to maximize the safety of our students. Also note that information included as a part of this application may be shared/reviewed with the Jenks Campus Police.

PLEASE PRINT: Please complete all fields that apply. Incomplete applications will be rejected.

Today's Date: _____

PERSONAL DATA:

Last Name, First Name, Middle Name
(As it appears on your OK License / ID)

____ / ____ / ____
Birth date

____ - ____ - ____
Social Security Number

Email

Street Address City State ZIP Cell Phone

How long have you lived in Oklahoma? _____ If less than six months, previous address:

Driver's License No. _____ **Gender:** ☐ M ☐ F
Number State Issued Expiration Date

Emergency contact:

Name Phone Number Address Email Address

Your high school student's name and student ID number.

EDUCATION:

Name of school	Dates Attended	Course of Study	Diploma/Degree

Other educational experience/special skills (i.e., first aid, CPR, sign language, training or experience working with special needs students).

EMPLOYMENT HISTORY:

Current Employer	Job Title			Supervisor
Street Address	City	State	Zip	Phone
Brief Job Description/Duties			Employment dates	

Former Employer	Job Title			Supervisor
Street Address	City	State	Zip	Phone
Brief Job Description/Duties			Employment dates	

Former Employer	Job Title			Supervisor
Street Address	City	State	Zip	Phone
Brief Job Description/Duties			Employment dates	

REFERENCES:

Please list three people not related to you whom you have known for at least three years:

Name	Address	Relationship	Phone

VOLUNTEER WORK EXPERIENCE/REFERENCE: (Please check your most recent experience)

Name of Organization	Capacity of Volunteer	Dates of Service	Supervisor

LIST BELOW CHAPERONING ACTIVITIES WITHIN THE PAST THREE YEARS

Name of Organization	Capacity of Volunteer	Dates of Service	Supervisor

As part of your volunteer record, a criminal history check may be conducted. A prior criminal record may or may not result in your disqualification for chaperoning, **failure to disclose your record WILL DISQUALIFY you from chaperoning overnight trips.** You must list on your application for volunteering all adult and juvenile misdemeanors, felonies or other criminal offenses other than non-criminal traffic violations. (DUI and reckless driving are criminal offenses.)

For the safety and protection of our students, please answer the following:

1. Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position? ☐ YES ☐ NO
2. Have you every entered a plea of guilty or nolo contender to a state (any state) or federal felony charge? (This question includes criminal cases involving a “deferred sentence”, “deferred judgment” and any “expunge of records.”) ☐ YES ☐ NO
3. Have you ever been convicted of a state (any state) or federal felony charge? ☐ YES ☐ NO
4. Have you ever entered a plea of guilty or nolo contender to, or been convicted of, a state (any state) or federal misdemeanor charge involving illegal chemical substances or illegal sexual activity? (This question included criminal cases involving a “deferred sentence”, “deferred judgment” and any “expunge of the records”. ☐ YES ☐ NO
5. Have you ever entered into a deferred prosecution agreement with a state (any state) or federal prosecutor? ☐ YES ☐ NO
6. Have you ever been required to register as a sex offender under the Oklahoma Sex Offender Registration Act or under similar laws in another state? ☐ YES ☐ NO
7. Are you currently serving probation, parole, or community service as part of a court-ordered sentence and/or disposition?
☐ YES ☐ NO
8. Have you ever forfeited bond/bail due to failure to appear for a court proceeding? ☐ YES ☐ NO

9. Are you able to perform all duties and responsibilities as outlined in the Chaperone Handbook? ☐ YES ☐ NO

If you answered “YES” to any question 1-8 above, you must list on a separate piece of paper each and ALL charges or offenses, including dates, city, and state where the offense(s) occurred. Also include an explanation of each charge or offense in your own words, including the final outcome. Please attach the information, along with copies of final court dispositions, probation records, and any other official documentation supporting your explanation to this application form.

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I state that all of the information provided above is true and accurate to the best of my knowledge. I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is a federal crime punishable by law. I certify by my signature that I have read, understand and agree to comply with the guidelines and expectations set forth in the Jenks Band Parents Chaperone Handbook.

Signature _____ Date _____