

**SUBJECT: SCHOOL VOLUNTEERS**

The Board recognizes the need to develop a school volunteer program to support District instructional programs and extracurricular activities. The purpose of the volunteer program will be to:

- a) Assist employees in providing more individualization and enrichment of instruction;
- b) Build an understanding of school programs among interested citizens, thus stimulating widespread involvement in a total educational process;
- c) Strengthen school/community relations through positive participation.

Volunteers are persons who are willing to donate their time and energies to assist principals, teachers, and other school personnel in implementing various phases of school programs and in curricular, co-curricular or extracurricular programs. Volunteers shall serve in that capacity without compensation or employee benefits except for liability protection under the District's insurance program.

**General Guidelines**

- a) Use of volunteers will not replace any duly appointed or authorized District personnel or conflict with the duties or job responsibilities of these personnel. Any information gained through volunteering must be held in strict confidence with the building principal or designee assuring that the volunteer has no access to confidential student or personnel data unless designated by a school official in accordance with the Family Educational Rights and Privacy Act (FERPA).
- b) Volunteers will not discuss with others, when serving as a volunteer or when no longer in a volunteer role, the content of any confidential student information which was learned in the course of or because of their volunteer work in the school; nor will they disclose or permit to be disclosed, directly or indirectly, student education records, personally identifiable student information in those records, or other confidential information regarding any student. Exceptions to this rule include their ability to discuss student information with designated staff members and/or as authorized by administration.
- c) They will never take any confidential student data off campus.
- d) Volunteers may assist on an occasional or regularly scheduled basis, however, they may not teach or provide the initial instruction for accomplishing educational objectives; but may reinforce skills taught by the professional staff.
- e) Volunteers may not provide transportation to students in their personal automobiles for any school-sponsored activities.
- f) Volunteers may not be assigned the responsibility for disciplining students but may assist the teacher in maintaining proper behavior of students and report behavioral problems to the teacher.

(Continued)

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- g) Volunteers may not supervise a class in the absence of the teacher.
- h) Volunteers will not contact parents regarding the performance of students or write comments on any papers or school work sent home.

**Implementation of the Volunteer Program**

- a) General administration of the volunteer program in the District will be the responsibility of the Superintendent or designee with building principals assuming general authority over volunteers.
- b) The need for volunteers will be determined by the building principal and other designated personnel.
- c) Each prospective volunteer must complete an application which will be forwarded to the District Office for review. All regularly scheduled volunteers will, at a minimum, complete an application, provide authorization for a reference check, and be screened and interviewed by the building principal or designee. Occasional volunteers will be screened by the building principal in a manner of his or her choosing.
- d) The building principal will forward his or her decisions concerning selection, placement, and replacement of volunteers to the Superintendent for final evaluation. Following approval from the Superintendent, volunteers selected for work in the District will be placed on the list of approved volunteers. However, the Superintendent retains the right to approve or reject any volunteer applications submitted for consideration.
- e) Building principals will assume final responsibility for the assignment of volunteers from the approved list.
- f) Volunteers will work under the supervision of appropriate staff and are expected to comply with all District rules and regulations.
- g) The District does not carry health or accident insurance or Workers' Compensation on volunteers. Approved volunteers are covered for their actions or omissions within the scope of their approved authority under the liability section of the District's umbrella policy.
- h) Volunteers must sign in and out in the school office.
- i) Each school will keep a volunteer registry which will include, but not be limited to, the following information: name, address, telephone number, and emergency contact.
- j) Volunteers must wear appropriate identification, as determined by the Superintendent, or building principal or supervisor, or designee, to ensure immediate recognition as persons whose specific purpose is helping students and staff.

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**SUBJECT: SCHOOL VOLUNTEERS (Cont'd.)**

**Volunteer Confidentiality Agreement and Signature** (required for all volunteers)

By signing, I acknowledge that I have read, understand, and will comply with the issues of confidentiality indicated in the policy.

\_\_\_\_\_  
Name of Volunteer (please print)

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Date

This Confidential Agreement will be kept on file in the Main Office of the building to which the volunteer is assigned. A copy of the Agreement will be provided to the volunteer.

Volunteer Protection Act of 1997, 42 USC Section 14501 et seq. Education Law Sections 3023 and 3028  
Public Officers Law Section 18

NOTE: Refer also to Policy #6540 -- Defense and Indemnification of Board Members and Employees

Adopted: 7/1/13;  
Revised: 2/12/18; 6/5/19

**OPPENHEIM-EPHRATAH-ST. JOHNSVILLE CENTRAL SCHOOL DISTRICT  
SCHOOL VOLUNTEER APPLICATION**

**Personal Information**

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First)

Address: \_\_\_\_\_  
(Street) (City, State, Zip Code)

Telephone: \_\_\_\_\_  
(Home) (Work) (Cell)

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(Name) (Phone Number)

<p>Identify any school(s) at which you wish to volunteer: _____</p> <p>Identify areas of interest, specific activities or skills, on which you wish to focus after volunteering: _____ _____</p> <p>Do you speak any other languages other than English? _____</p>
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<p>Please indicate the times your services will be available: Day(s) of week: _____ Hours: _____</p> <p>If you are not available on a regular basis, please give some idea of your time commitment: _____ _____</p> <p>Have you taught in our schools? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which years? _____</p> <p>Have you volunteered in our schools before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please indicate if you are currently volunteering in our schools <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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Which School(s)?	Which Staff Members?	When?

**OPPENHEIM-EPHRATAH-ST. JOHNSVILLE CENTRAL SCHOOL DISTRICT  
SCHOOL VOLUNTEER APPLICATION (Cont'd.)**

References and Authorization for Reference Check: Provide the names of four individuals, not related to you, who have knowledge of your character, personality, and abilities to work in a school environment. Two of the names should be your current and/or previous employers.

	Name	Address (Street, City, State, Zip Code)	Telephone Number
1			
2			
3			
4			

My signature below permits the District to contact any or all references listed, if necessary:

\_\_\_\_\_  
Applicant's Signature Date

If vouching for this volunteer, Principal's signature: \_\_\_\_\_

Principal's Name and School (Print): \_\_\_\_\_

**BACKGROUND CHECK AGREEMENT**

It is the policy of OESJ CSD to require all volunteers to complete this Disclosure Statement. Subsequently, the District will complete a background check for conviction(s) and pending charges.

\*Social Security Number: \_\_\_\_\_ Number of years at above address: \_\_\_\_\_  
Date of Birth: \_\_\_/\_\_\_/\_\_\_ Driver's License Number: \_\_\_\_\_

Have you ever been convicted of or do you have any charges pending for felonies, misdemeanors, and/or ordinance violations other than minor traffic violations?  Yes  No

If yes, please fill in the information below and include date, location and nature and circumstances of the offense.

By signing, I authorize the OESJ CSD to review my personal background. I consent to having the OESJ CSD conduct a full and complete criminal background check. I understand that any misrepresentation on this statement may result in an immediate disqualification for any volunteer service within the OESJ CSD. I understand that the OESJ CSD will verify the information I have provided above. I hereby release the District, its Board and its agents, as well as all providers of information, from any liability related to the furnishing and receiving information related to arrests and convictions.

\*Your Social Security Number will be used as stated above. State and federal laws protect the privacy of your records.

\_\_\_\_\_  
Applicant's Signature Date

*Please sign and return the printed version of this form to the Main Office of the Jr./Sr. High School of the Elementary School.*