#### SCHOOL VOLUNTEERS

The Board recognizes that community members can provide valuable services to the schools by sharing their time, talents and experience. An effective volunteer program allows students to benefit from individual attention, provides enrichment opportunities that supplement the regular educational program, allows teachers to focus on teaching and learning by relieving them of non-teaching tasks, provides interested community members an opportunity to become directly involved with education, and strengthens the relationship between school and community.

The Board approves the use of volunteers to support the school system's instructional programs and extracurricular activities. The Board adopts this policy to provide direction for the school system's volunteer program.

For the purpose of this policy, a volunteer is a person who provides services, without compensation or benefits of any kind or amount, on an occasional or regular or recurring basis in the schools or in school activities.

All volunteers shall be at least 18 years of age unless their volunteer work is part of a class, is done to fulfill a service learning or community service requirement for graduation, or is done by a recognized student organization.

Volunteers may provide assistance by:

- A. Tutoring students on a one-to-one or small group basis under the direct supervision of the classroom teacher;
- Using their special musical, artistic or other talents to provide enrichment experiences and extend student learning;
- C. Reading to children;
- Playing instructional games;
- Providing services in libraries, lunchrooms and playgrounds;
- F. Accompanying students on field trips;
- G. Assisting teachers in assembling instructional materials; and
- H. Assisting in school plays, music programs and other co-curricular and extracurricular activities.

Volunteers serve under the direction and supervision of the building principal or designated staff. When volunteers work with children, their activities will be under the direct and immediate supervision of the classroom teacher, coach, activity adviser, or other designated employee.

Approval, assignment, continuation, or termination of volunteers shall be at the discretion of the building principal.

Staff must have their use of volunteers approved in advance by the building principal. Volunteers will only be assigned to staff who request them.

Volunteers are expected to abide by all Board policies, procedures and school rules when performing their assigned responsibilities. The building principal shall make volunteers aware of applicable policies, procedures, and rules before they undertake their first assignment through a volunteer orientation, volunteer handbook, or other means.

Volunteers should perform only those tasks that have been assigned.

Volunteers will not have access to confidential information in student records except as allowed by federal or state law or regulations and will be responsible for maintaining confidentiality regarding information seen or heard while working as a volunteer.

Persons interested in volunteering time or services should contact the building principal. Prospective volunteers will be required to complete a written application.

In the interest of protecting the safety of students and staff, the school unit will conduct criminal background checks, including sex offender registry checks, on all volunteers who serve on a recurring or regular basis during the school year and who will be working directly with or will have access to students. It is the Board's intent to encourage the use of volunteers in its schools while also protecting our students through appropriate screening measures.

Volunteers may not transport students in private vehicles except as allowed by Board policy.

The school unit will provide liability insurance protection for volunteers while performing assigned services.

The Superintendent will be responsible for devising a method for evaluating the effectiveness of the volunteer program on an annual basis.

The Board will recognize volunteer service on an annual basis. The building principal will be responsible for appropriate school recognition of volunteers.

Legal Reference:

20-A M.R.S.A. § 1002

Cross Reference:

EEAG - Student Transportation in Private Vehicles

IJOA - Field Trips and Excursions

Adopted: 12/11/14



Steffany Tribou

Assistant Superintendent

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### APPLICATION FOR SCHOOL VOLUNTEER

REGIONAL SCHOOL UNIT 13 DOES NOT DISCRIMINATE IN THE OPERATION OF ITS EDUCATIONAL AND EMPLOYMENT POLICIES AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION.

Prospective volunteers must complete and sign the Volunteer Application form and Volunteer Confidentiality Agreement. Criminal Background checks will be performed on all volunteer applicants who will work with students on a continuing basis. Any information obtained through this form and background checks will remain strictly confidential.

Date			
NameFirst	Middle	Last	
Address			
City	State	Zip	
Telephone	E-Mail Address		
Date of Birth	(required for backgrou	ınd check)	
Please attach a copy of driver's licens	se or other ID contai	ning name and date of birth	
At which school(s) do you wish to be a vol	unteer?		
<ul><li>☐ Ash Point Community School (Pre-K-5</li><li>☐ Oceanside High School (9-12)</li><li>☐ South School (Pre-K-5)</li><li>☐ Special Education</li></ul>	Oceanside M	☐ Cushing Community School (K-5) ☐ Oceanside Middle School (6-8) ☐ Thomaston Grammar School (K-5)	
Why do you wish to volunteer in our scho	ools?		
		9	
4			
	4		

BACKGROUND: The following information is asked of all individuals who work with our children to help ensure the safety of our students. A YES answer does not automatically disqualify you for volunteering.

1. Have you had any criminal conviction(s) within the past 2 years other than a minor traffic violation?	☐ Yes ☐ No
2. Have you had any criminal conviction(s) within the past 10 years that involve(s) a minor?	☐ Yes ☐ No
3. Have you had two or more criminal convictions within the past 10 years?  Output  Description:	☐ Yes ☐ No
Have you EVER had any assault or sexual misconduct convictions against a minor?	☐ Yes ☐ No
If you have answered YES to any of the above questions $(1 - 4)$ , provide full deadditional sheets if necessary.	etails below. Use
a	
e E	
If you have lived outside of Maine, please specify states and dates:	
Refusal to provide authorization for criminal background checks and/or prov misleading information on this application shall constitute sufficient reason t to serve as a volunteer or termination as a volunteer in Regional School Unit	o deny approval
I understand that Regional School Unit 13 performs criminal background che volunteers who will work with students on a continuing basis, and I authorize entities contacted by the School District in connection with this application to information about me. I expressly waive in connection with any request for or such information, any claims, including without limitation, defamation, emotinvasion of privacy, or interference with contractual relations that I might oth against the school district, its agents and officials or against any provider of starther understand that as a volunteer applicant, I am required to sign the Confidentiality Agreement below. I am aware that I will receive no compensation services.	e persons and provide provision of ional distress, lerwise have such information.
I have been truthful in all information and responses to questions on this app	olication.
Signature of Volunteer Date	

Because we are responsible for student safety and need to take a conservative approach, our district will deny volunteer applications for the following reasons:

- 1. Any conviction within the past 2 years other than minor traffic violation
- 2. Any conviction that involves a minor within the past 10 years
- 3. Two or more convictions within the past 10 years
- 4. Any assault or sexual misconduct against a minor
- 5. Administrator discretion

Any applicant who is denied may appeal the denial through a meeting with the Superintendent. If a unique situation exists, approval may be reconsidered.

#### **VOLUNTEER CONFIDENTIALITY AGREEMENT**

I understand that ALL student and staff information is confidential. I agree not to access, review, disclose, or use confidential student or staff information without specific authorization from a school administrator. I also understand that even when I am no longer a volunteer in the schools, any confidential information I have learned must continue to be kept confidential. I understand that any breach of these confidentiality requirements will result in my immediate termination as a volunteer and may result in legal action against me.

I understand that I must comply with all Board policies and school rules applicable to school staff, as well as all directions from school administrators and staff while serving as a volunteer. I further understand that my authorization to serve as a volunteer may be terminated at the discretion of the Superintendent and School Principal at any time if they determine it is in the best interests of Regional School Unit 13.

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Signature of Volunteer	Printed Name	Date		
NOTE: All employment application None will be returned.	n materials become the prope	erty of Regional School Unit 13.		
♦ BUILDING ADMIN USE ONLY Building Administrator: Please		als.		
This Volunteer <u>will</u> be working with students on a continuing basis. Criminal Background check <u>IS</u> required.				
This Volunteer <u>will not</u> be working with students on a continuing basis.				
* NOTE: Any volunteer who will be alone or unsupervised with students needs fingerprinting completed and on file.				
♦ CENTRAL OFFICE USE ONLY ♦ Central Office Administrator: Please select one with your initials.				
Application Approved	ě			
Application Denied				
CO Administrator or Authorized C	Official:	Date:		

# SOUTH SCHOOL VOLUNTEER

## **EMERGENCY CONTACT FORM**

Volunteer Name		
Volunteer Contact Information		
Home address		
City, State, ZIP		
Primary Contact #	Secondary Contact #	
Email		
<b>Emergency Contact Information</b>		
1. Name	Relationship	
	Secondary Contact #	
	Relationship	
Primary Contact #	Secondary Contact #	
	*	
Medical Contact Information:		
Doctor	Contact #	
Do you give us permission to transport	t you to the nearest medical facility should you incur serious	
illness or injury during normal work hours?  Yes No		
This information will only be used in	the event of an emergency.	
result in the need for medical attention.	ns at South School if you have a medical condition that may . Medical information is confidential. It is your decision and lieve it necessary for your health and safety while on campus.	
I have voluntarily provided the above contact information and authorize South School/RSU13 to contact any of the above on my behalf in the event of an emergency.		
Volunteer Signature	Date	