
References:

Name

Phone Number

Name

Phone Number

Criminal Record Check:

Date completed

Date Submitted

I certify that the information given in this form is true and correct and I agree that falsification or omission of information called for may result in my removal as a volunteer. I agree to all school and district policies and procedures. To ensure the safety and well-being of children, I am aware that I may be asked to provide a copy of a Criminal Record check.

Signature

Date

Administrator Approval:

Date Approved:

Last reviewed: October 2016

SCHOOL VOLUNTEER CODE OF CONDUCT
(AS PER ADMINISTRATIVE PROCEDURE 495)

In order to help secure the safest possible environment for students, this document defines the district's expectations for all school volunteers.

As a volunteer, I agree to abide by the following Volunteer Code of Conduct.

1. I agree to act in a respectful manner and practice an ethic of care with all children and members of the school community.
2. I agree to abide by all instructions and directions given to me by the supervising teacher, principal/vice principal or designated staff member while volunteering.
3. I have spoken with the supervising teacher about student behaviour and expectations and understand my role in responding to students.
4. I will maintain confidentiality at all times.
5. I will not contact students outside of school hours without permission from the principal.
6. As per AP 495, I may be required to complete a Criminal Record Check.
7. I will abide by *Administrative Procedure 253* when transporting students.
8. I will abide by all school and district policies and procedures.
9. I will not use my access to students or volunteer responsibilities for personal gain.

I agree to follow the Volunteer Code of Conduct at all times.

Print Name

Date

Signature

Last reviewed: October 2016