

**Public Schools Branch**  
**VOLUNTEER APPLICATION FORM**

**Current School Year:** \_\_\_\_\_

**School:** \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

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

Do you have children or are you related to any children registered at this school?  Yes  No

If yes, please list relationship to student(s):

Student	Relationship
_____	_____
_____	_____

If no, please list at least two references (non-family members) with whom the school may contact:

Name	Telephone #
_____	_____
_____	_____

**Emergency contact information:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Do you as a volunteer, have any allergies, physical limitations, disabilities, medical or health concerns that we should be aware of? Please specify. \_\_\_\_\_

**Optional:**

As our student school population becomes more diverse, it is positive to see diversity among our school volunteers. Responses to these questions are optional and in no way impact approval of your application.

Are you a visible minority?  Yes  No Please identify: \_\_\_\_\_

As a volunteer, I fully understand and agree to the following:

- School volunteer service is permitted at the discretion of the Principal.
- I will preserve the confidentiality of any personal information which I may see or hear in respect to students, parents, staff or administration. I will hold all such information in the strictest of confidence and I shall not use, copy or disclose such information to any other individual in whole or in part, in any manner or form, unless I have obtained the permission of the Principal.
- Any information collected, used, generated, and stored by the school including student, instructional, financial, or administrative information is strictly confidential and is to be used only in the performance of volunteer duties.
- I may not disclose, communicate, publish, take, alter copy, interfere with, or destroy any information unless I am specifically authorized to do so by the teacher or Principal.
- Teaching and administration staff are responsible for student learning and discipline.
- School administration, teaching and support staff have specific roles to play and it is important that the staff of a school operate as a team. A volunteer can assist greatly in enhancing student learning by working positively and cooperatively with the school team.
- Failure to comply with these conditions and school board policy may result in termination of my position as a volunteer.

Criminal Record Check/Vulnerable Sector Inquiry

A valid and satisfactory Criminal Record Check including a Vulnerable Sector Inquiry is required before volunteer approval is confirmed. Please attach the original copy with your application form. See the *Volunteer Handbook* for more information.

By signing this volunteer application form, I agree to the conditions outlined. I certify that the information given in this form is true and correct and I agree that falsification or omission of information may result in my removal as a volunteer. I have read, understand and agree to the *Public Schools Branch Volunteers in School* policy and procedure and the current volunteer handbook.

**If under the age of 18 a parent or legal guardian must sign.**

I hereby certify that I am the parent/legal guardian of \_\_\_\_\_, a minor, and that s/he has my permission to serve as a volunteer. As the parent/legal guardian, I understand and have full knowledge of the nature and extent of the risks involved with his/her participation as a school volunteer.

\_\_\_\_\_  
Signature of volunteer or parent/legal guardian

\_\_\_\_\_  
Date

2018

**For office use only:**

Valid and satisfactory Criminal Record Check with Vulnerable Sector Inquiry

Date submitted: \_\_\_\_\_ Date approved: \_\_\_\_\_

Approval Signature: \_\_\_\_\_ Position: \_\_\_\_\_