



Volunteer Registration Form

Background

Northwest School Division believes volunteers are a valuable part of the school community and can enhance educational services.

Role

1. The assignment of duties for a volunteer rests with the school Principal.
2. However, for those volunteers who work with students in a school on a regular, ongoing basis, it is expected that volunteers will be entitled to:
 - a. Know what is expected of them;
 - b. Be treated in a respectful manner.
3. Volunteers shall:
 - a. Follow through with commitments;
 - b. Abide by the directions of the Principal/classroom teacher;
 - c. Maintain confidentiality;
 - d. Accept guidance and direction.

Registration Form

Name: _____

Address: _____

Telephone Number: _____

Name of School to Volunteer: _____

Do you have siblings, children or grandchildren registered in this school: Yes No

If yes, please list name and grade:

School Office Use:

Crim Check Approved: Current Driver's License: AppliTrack:

Comments: *(Form 557 Transportation)*

Criminal Record Check

The Division believes that providing a safe environment for students and staff requires the utmost diligence on its part. To that end the Division requires that all persons being recommended for employment, prospective interns and volunteers undergo a criminal record check. Northwest School Division requires a current, original criminal record check, six months or newer, as per AP 400 Criminal Record Check.

Any employee or volunteer, after having been charged with a criminal offense, must within two (2) working days inform the Director. This is to be done orally and subsequently in writing within seven (7) days as per AP 401 Reporting Criminal Record Charges.

I, _____, understand I must provide an acceptable criminal record check and understand the expectation from Northwest School Division to be notified if a criminal offense charge occurs.

Confidentiality

I, _____, promise that I will maintain confidentiality with respect to information regarding all students or employees of the Northwest School Division. I understand that disclosure on my part of any such privileged information may be cause for the removal of my status as an approved volunteer in the Northwest School Division.

IN WITNESS WHEREOF this _____ day of _____, 20____, I hereby acknowledge that I have read, understand the above responsibility as a Northwest School Division volunteer.

Volunteer Signature: _____

WITNESS

Name (printed): _____

Signature: _____