

## Volunteer Application Form

HUMAN RESOURCES

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In order to help secure the safest possible environment for students, it is the policy of North Vancouver School Board that all volunteers complete a copy of the Volunteer's Application

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

Volunteer for (Staff Name): \_\_\_\_\_

Name: \_\_\_\_\_  
Last Name First Name Initial

Address (Street, City, Postal Code): \_\_\_\_\_

Birth Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have children in the school? ☐ Yes ☐ No

If yes above, please provide the name(s) of children in the school:

1. Have you ever been convicted of a criminal offence? ☐ Yes ☐ No
2. Are there currently any outstanding criminal charges against you? (Note: A criminal charge or conviction will not automatically exclude you from volunteer opportunities. The nature of the volunteer activities and the circumstance related to the charge or conviction will be considered.) ☐ Yes ☐ No
3. Do you know of any reason why you should not participate as a volunteer where you will be in contact with children? ☐ Yes ☐ No
4. Do you have any communicable or infectious disease? (Note: A communicable or infectious disease will not automatically exclude you from volunteer opportunities. The nature of the volunteer activities and the nature of the communicable or infectious disease will be considered.) ☐ Yes ☐ No

If any of the above questions 1, 2, 3 or 4 are answered YES, please provide details in the space provided below. Confidentiality will be respected. Include at least one authority (name, position, and telephone number) with whom we may discuss matters and confirm details.

Provide the names and telephone numbers of two references, who are not related to you in any way.

1. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

☐ I have read and understand all of the following policies:

**Policy 404: Volunteers In Schools -**

[https://www.sd44.ca/Board/PoliciesProcedures/Series400/Policy404/Pages/default.aspx#/=](https://www.sd44.ca/Board/PoliciesProcedures/Series400/Policy404/Pages/default.aspx#/)

**Policy 607: Transportation of Students -**

[https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy607/Pages/default.aspx#/=](https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy607/Pages/default.aspx#/)

**Policy 611: Privacy -**

[https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy611/Pages/default.aspx#/=](https://www.sd44.ca/Board/PoliciesProcedures/Series600/Policy611/Pages/default.aspx#/)

I certify that the information given in this form is true and correct and agree that falsification or omission of information called for may result in my removal as a volunteer. To ensure the safety and well-being of children, permission is hereby granted to conduct any investigation including a criminal record search, that may be deemed desirable regarding the information contained in this form.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Dorothy Lynas Volunteer Code

- ☒ I agree to abide by all instructions and direction given to me by the supervising teacher while volunteering.
- ☒ I have read the Dorothy Lynas Code of Conduct and will follow its guidelines respectfully and responsibly while volunteering.
- ☒ I have spoken with my supervising teacher about student behavior and expectations and understand my role in responding to students.
- ☒ I have reviewed with the supervising teacher the emergency and fire drill procedures in place at the school.
- ☒ I am aware of the confidential nature of teacher records, student records, student individual programs, and student progress and agree to refrain from discussing or making comments of a personal nature regarding students, staff, and individual programs or individual student progress.
- ☒ If I am a volunteer driver, I understand that I must complete the volunteer driver's check in the school office prior to driving students.
- ☒ I understand that North Vancouver School District Policy 404: Volunteers in Schools may result in the principal requiring additional information from me prior to certain specific types of volunteer activity.

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

*The active involvement of parents in a volunteer role has the potential to provide considerable benefit to the intellectual and social development of students. In addition, the participation of volunteers increases communication and positive relationship between the school, parents, and the community. Consequently, the Board supports and encourages the use of volunteers to support the work of employees. (Excerpt from NVSD Policy 404: Volunteers in Schools.)*

Thank you for your valuable and welcome support as a

Dorothy Lynas

School volunteer!

## Confidentiality Declaration

### For all employees and volunteers:

I (please print name) \_\_\_\_\_  
have read and understand the Privacy Policy 611.

I understand that personal information of students, families and employees to which I have access during my employment or affiliation with the District must be treated confidentially and must be collected, used and disclosed in compliance with the District's *Privacy Policy*, the *Freedom of Information and Protection of Privacy Act* and the *School Act*. I understand that personal information may only be exchanged with other authorized personnel and volunteers who have legitimate educational or employment purposes for accessing such information. I acknowledge that I am required to take reasonable steps to ensure that security measures outlined in the Policy are in place when I am using the District's systems.

I understand that the District may monitor my use of its systems without prior notice in order to ensure that privacy rights are protected and that the District's network communications are being utilized for valid work related purposes.

I further understand that there may be consequences if I violate the terms of this agreement, including loss of access privileges and disciplinary action if I am a School District employee.

Signature: \_\_\_\_\_

Employee Number: \_\_\_\_\_

Date (y/m/d): \_\_\_\_\_

Location: Dorothy Lynas