

SUSQUEHANNA TOWNSHIP SCHOOL DISTRICT

World Class. Every Day. In Every Way.

DISTRICT OFFICE

2579 Interstate Drive, Harrisburg, Pennsylvania 17110 717.657.5100 | F.717.724.1851 | www.hannasd.org

VOLUNTEER PROGRAM

VOLUNTEER MANUAL

This Volunteer Manual contains FORMS and information needed to become a member of the STSD Volunteer Program.

Under Pennsylvania law, all school volunteers must meet certain requirements. Therefore, ALL volunteers must be members of the STSD Volunteer Program to ensure the safety of our students and staff, and for the School District to be in compliance with Pennsylvania State Laws.

To become a member of the Volunteer Program you must qualify as a Level 1, Level 2, or Level 3 Volunteer depending on your volunteer activity. The Volunteer Coordinator will determine your requirements and work with you to obtain them. If you have lived in Pennsylvania for 10 years or more, the required clearances are free and valid for five years.

Below are examples of volunteer activities and the associated volunteer levels.

Level 1 - Activities that are NOT directly related to helping students, but students may be present. These activities typically do not occur during school hours.

Examples: Concession stand help, Fall Fest/May Fair, HANNA's Pantry

Level 2 - Volunteer activities that are directly related to volunteering WITH students. These activities typically do occur during school hours.

Examples: Board Officer, Booster Club Volunteer, Classroom party, Book fair, Secret/Holiday Shop, Parent reader or listener, Lunchtime assistance, Tutoring program, Field Day, Musical/play, Dance chaperone

Level 3 - Activity that is directly related to volunteering WITH students for a longer duration of time than Level 2.

Examples:, Mini Thon chaperone, ride a bus with students to an event or activity, Field trip/event chaperone **Field trip/event chaperones must also complete the STSD Chaperone Guidelines for Day and Overnight Field Trips

Level 1 Check List:	Level 2 Check List:	Level 3 Check List:		
Read the Volunteer Manual Registration Form* Volunteer Statement*	Level 1 Requirements PA Child Abuse History Clearance PA Criminal History Record Check	All Level 1 Requirements All Level 2 Requirements Negative TB Test Results		
* Included in this Volunteer Manual and require your signature.	FBI Criminal History Report ONLY required if you haven't been a PA resident the last 10 years	Chaperone Acknowledgement**		
For assistance, please contact: PLEASE SUBMIT ALL THE REQUIRED DOCUMENTS				

VOLUNTEER COORDINATOR

volunteers@hannasd.org 717-657-5100 ext 54000

AT LEAST ONE WEEK BEFORE YOUR ACTIVITY.

TO THE DISTRICT OFFICE

SUSQUEHANNA TOWNSHIP SCHOOL DISTRICT VOLUNTEER PROGRAM STSD SHARED NORMS AND VOLUNTEER EXPECTATIONS

Thank you for your interest in volunteering with our students. School volunteers enhance the educational experience by working as the extra hands and ears of teachers whose responsibilities extend to many students - ensuring smooth operations in classrooms, at many school and PTO activities, AND by listening, caring, and supporting our students.

WE ALSO RELY ON OUR VOLUNTEERS TO SET A GOOD EXAMPLE FOR OUR STUDENTS, BY FOLLOWING THE <u>ADULT SHARED NORMS</u> AND REINFORCING THE <u>SOAR GUIDELINES</u> THAT OUR STUDENTS ARE EXPECTED TO FOLLOW EVERY DAY.

Please review the **Shared Norms** below and then follow the instructions on the following pages to register to become a member of our Volunteer Program.

Thank you for your willingness to share your time with our school community!



Safety	Ownership/Accountability	Respect
 Promote safety rules in every setting. Report safety concerns as soon as possible. Be aware and alert. Monitor students at all times. Act as a safe haven for students. 	 Be honest. Use consistent language when teaching norms. Own your choices and actions. Learn from your mistakes. Meet your deadlines. Be on time. Work collaboratively. Partner with parents (staff). Partner with district staff (parents/guardians). Support students and remember that they are children. Promote a growth mindset. Build, support, and maintain healthy relationships. Take an active role in your professional learning (staff). Take an active role in your student's education (parents/guardians). Demonstrate good sportsmanship. 	 Do use language that is appropriate for all situations and that does not include profanity Seek first to understand and meet individual where they are. Demonstrate mutual respect for all individuals. Value, acknowledge, and accommodate cultural differences. Be kind and polite to students, parents and peers (staff). Be kind and polite to students, staff and peer (parents/guardians). Listen to and value others' opinions. Respect student and family confidentiality.

DOCUMENTS REQUIRED TO BECOME A VOLUNTEER

This page details the documents required to become a member of the STSD Volunteer Program. **To ensure your request is approved in time for your first volunteer activity:**

- Refer to the checklists on Page 7 for documents required for each volunteer level.
- Please do not submit any documents until you have obtained ALL required documents.
- All required documents **MUST BE ON FILE** prior to your first volunteer activity.
- If you have existing clearances, you may submit your evidence of them.
- Please keep a copy of your clearances for your personal records.
- Contact the Volunteer Coordinator for paper applications or with questions.
- 1) Forms in this Manual please read, fill out, and sign the forms on Page 4, 5, 6 and 7.
- 2) PA Child Abuse Clearance: (2 options to obtain this clearance)
 - -- APPLY IN PERSON: Child Abuse Registry

Department of Human Services

2525 North 7th Street Harrisburg, PA 17110

- -- APPLY ELECTRONICALLY Goto: http://www.compass.state.pa.us/cwis/public/home Click "Create Individual Account" to create an Account on the Child Welfare Portal and follow the prompts to provide your information on the application.
- 3) PA State Police Criminal Background Check Goto: https://epatch.state.pa.us/
 - Click the button for "New Record Check (Volunteers Only)"
 - Accept the terms and then enter requested information
 - Select the "Registration...." link that start with Control #R.....
 - Select the "Certification Form" link and print the certificate or save to your computer If your name does not show any records in the database, you can print the "No Records" certificate immediately. During busy times, you may receive a "Request Under Review" response and your certificate will follow when complete. Please note the Control # for your records.

4) Negative TB Test Results – Required for Level 3 Volunteers

You must provide a copy of a Tuberculosis(TB) Test showing the results of the reading were negative and performed within the last 3 months. Contact the Volunteer Coordinator for a list of local facilities or visit your family doctor.

5) Mandated Reporter Training, Act 31 -

We encourage all who volunteer regularly or chaperone field trips/events to take the online course and provide the certificate of completion. The free training can be found at: http://www.reportabusepa.pitt.edu

IN ADDITION: If you have NOT been a Pennsylvania Resident for the last 10 years you are also required to provide your FBI Criminal History Check through fingerprinting at an IDEMIA/Identogo location. The process requires preregistration at: http://uenroll.identogo.com and Volunteer Service Code: 1KG6ZJ. When you enroll, you are given the opportunity to schedule an appointment at a local fingerprinting site. There is a fee for this clearance. IF YOU HAVE BEEN A PENNSYLVANIA RESIDENT THE LAST 10 YEARS, THIS CLEARANCE IS NOT REQUIRED.

VOLUNTEER DISCLOSURE STATEMENT

Required by the Child Protective Service Law 23 Pa. C.S. Section 6344.2 (relating to volunteers having contact with children)

SIGNATURE REQUIRED ON THE FOLLOWING PAGE

I SWEAR/AFFIRM that I am seeking a volunteer position and AM NOT required to obtain a clearance through the Federal Bureau of Investigation (FBI Fingerprint Clearance), as:

- the position I am applying for is unpaid; AND
- I am applying as Level 1 Volunteer and it is not required for this level of volunteer service OR
- I have been a resident of Pennsylvania during the entirety of the previous 10 year period.

I SWEAR/AFFIRM that I have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

I SWEAR/AFFIRM that I have been NOT been arrested for or convicted of an offense or offenses enumerated under 24 P.S. §§1-111(e) or (f.1) ("Reportable Offense(s)") listed below:

(1) Offenses under Title 18 of the Pennsylvania Consolidated Statues:

Chapter 25 (relating to criminal homicide)

Section 2702 (relating to aggravated assault)

Section 2709 (relating to stalking)

Section 2901 (relating to kidnapping)

Section 2902 (relating to unlawful restraint)

Section 2910 (relating to luring a child into a motor vehicle or structure)

Section 3121 (relating to rape)

Section 3122.1 (relating to statutory sexual assault)

Section 3123 (relating to involuntary deviate sexual intercourse)

Section 3124.1 (relating to sexual assault)

Section 3124.2 (relating to institutional sexual assault)

Section 3125 (relating to aggravated indecent assault)

Section 3126 (relating to indecent assault)

Section 3127 (relating to indecent exposure)

Section 3129 (relating to sexual intercourse with animals)

Section 4302 (relating to incest)

Section 4303 (relating to concealing death of child)

Section 4304 (relating to endangering welfare of children)

Section 4305 (relating to dealing in infant children)

A felony offense under Section 5902(b) (relating to prostitution and related offenses)

Section 5903(c) or (d) (relating to obscene and other sexual material and performances)

Section 6301 (a) (1) (relating to corruption of minors)

Section 6312 (relating to sexual abuse of children)

Section 6318 (relating to the unlawful contact with a minor)

Section 6319 (relating to solicitation of minors to traffic drugs)

Section 6320 (relating to sexual exploitation of children)

- (2) An offense designated as a felony under the act of April 14, 1972 (P.L.233, No. 64) known as "The Controlled Substance, Drug, Device and Cosmetic Act.
- (3) An offense SIMILAR IN NATURE to those crimes listed above under the laws or former laws of the United States OR one of its territories or possessions, OR another state, OR the District of Columbia, OR the Commonwealth of Puerto Rico OR a foreign nation, OR under a former law of this Commonwealth.

A reportable offense enumerated under 24 P.S. §1-111(f.1) consists of any of the following:

- (1) An offense graded as a felony offense of the first, second or third degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (10) ten years has elapsed from the date of expiration of the sentence for the offense.
- (2) An offense graded as a misdemeanor of the first degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (5) five years has elapsed from the date of expiration of the sentence for the offense.
- (3) An offense under 75 Pa.C.S. § 3802(a), (b), (c) or (d)(relating to driving under influence of alcohol or controlled substance) graded as a misdemeanor of the first degree under 75 Pa.C.S. § 3803 (relating to grading), if the person has been previously convicted of such an offense and less than (3) three years has elapsed from the date of expiration of the sentence for the most recent offense.

- Volunteer Disclosure Statement Con't

I UNDERSTAND THAT if I am arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or am named as perpetrator in a founded or indicated report, I must provide the administrator or designee with written notice not later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the Statewide database.

I UNDERSTAND THAT if the person responsible for employment decisions or the administrator of a program, activity or service has a reasonable belief that I was arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or was named as perpetrator in a founded or indicated report, or I have provided notice as required under this section, the person responsible for employment decisions or administrator of a program, activity or service shall immediately require me to submit current clearances obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of clearances shall be borne by the employing entity or program, activity or service.

I UNDERSTAND THAT if I willfully fail to disclose information required above, I commit a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position.

I UNDERSTAND THAT the person responsible for employment decisions or the administrator of a program, activity or service is required to maintain a copy of my clearances.

I HEREBY SWEAR/AFFIRM that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

PLEASE CHECK THE BOX BELOW THAT APPLIES TO YOU:

I have been a resident of Pennsylvani	a during the entirety of the previous 10 year period.
I have NOT been a resident of Pennsy period. But, I have received a FBI Criminal certification as the Level 2 or Level 3 require	ylvania during the entirety of the previous 10 year History Report and have attached a copy of the ements state.
I have NOT been a resident of Penns period. BUT, I am applying as Level 1 Volu	sylvania during the entirety of the previous 10 year inteer and it is not required for this volunteer level.
Name:	_Signature:
Witness:	_ Signature:
Data:	

S – Safety

O – Ownership

A – Accountability

R – Respect

SUSQUEHANNA TOWNSHIP SCHOOL DISTRICT ADULT SHARED NORMS AND **VOLUNTEER EXPECTATIONS AGREEMENT**

Thank you for volunteering with our students, we are so appreciative of your time! School volunteers enhance the educational experience by working as the extra hands and ears of teachers whose responsibilities extend to many students - ensuring smooth operations in classrooms, at many school and PTO activities, and by listening, caring, and supporting our students! WE ALSO RELY ON OUR VOLUNTEERS TO SET A GOOD EXAMPLE FOR OUR STUDENTS. BY FOLLOWING THE ADULT SHARED NORMS AND REINFORCING THE SOAR GUIDELINES THAT OUR STUDENTS ARE EXPECTED TO FOLLOW EVERY DAY.

AS A VOLUNTEER IN OUR DISTRICT, WE ASK THAT YOU SET AN EXAMPLE FOR **OUR STUDENTS BY AGREEING TO THE FOLLOWING:**

- 1. I have read the Adult Shared Norms and I will set an example for students by following them.
- 2. I will check in at the office each time I enter and exit the building.
- 3. I will be reliable and notify the office/volunteer coordinator if I will be late or unable to attend.
- 4. I will always wear the id badge provided to me while volunteering and always make it visible.
- 5. I will silence my cell phone and refrain from texting/talking while in any of our school buildings.
- 6. I will not photograph or record video of any student.
- 7. I will **always** use appropriate language/subject matter, even when not working with students.
- 8. I will refrain from lifting students-ie lifting students to reach equipment, swinging students, etc.
- 9. I will not share any information overheard concerning students or staff outside of the building. I know that everyone within our schools is expected to keep information about students and adults completely confidential, including volunteers. I will ONLY discuss student behavior and/or progress with the teacher.
- 10. I will remember students will model the behaviors they see adults displaying, so my actions and words will reflect SOAR at all times.

Please also keep these things in mind while volunteering:

- A student's name is VERY important and so is yours. Be sure they know your name. Demonstrate your interest in them by LISTENING!
 Help build students' self-confidence by pointing out the improvements you see. When helping to correct a student's work or manner, try to start that conversation by discussing the positives!
- Make sure you always leave the students on a positive and friendly note

Volunteer's Signature	Date
Thank you for volunteering	YOUR time with our students!

Susquehanna Township School District Volunteer Registration Form

Name:	Ho	ome phone:
Address:(street)	(zip code)	obile phone:
E-Mail Address:		ould you like to volunteer?
Student's Name: Student's Name: Are you a: Community Member Grandparent Parent/Guardian	Grade Thoma Middle High S	Lindemuth/Anna Carter Primary School as W. Holtzman Jr. Elementary School e School/Club (list): School/Booster (list): Trip (teacher): A's Pantry
Read the Volunteer Manual Registration Form* Volunteer Statement* Shared Norms Agreement* * Included in this Volunteer Manual and require your signature.	1 Requirements In this initial History Record Check riminal History Report Trequired if you haven't been a A resident the last 10 years	Level 3 Check List: All Level 1 Requirements All Level 2 Requirements Negative TB Test Results Chaperone Acknowledgement (if attending a field trip)
Are any of the above requirements on file with the I HAVE REVIEWED the Susquehanna Township the course of volunteering, confidential information information within or outside the Susquehanna Town I UNDERSTAND that my volunteer services are Township School District	p School District Volunteer Manu n may be made available to me. wnship School District communit	al and I am aware that during I will not disseminate this y.
Township School District.	DI FACE CUI	
Volunteer Signature	PLEASE SUBMIT ALL THE REQUIRED DOCUMENTS TO THE DISTRICT OFFICE	
Date	AT LEAST ONE W	EEK BEFORE YOUR ACTIVITY.
Received: SL TH MS HS DO Date:	Office Use Only Initials: DB Da	ate: TB Test:
Registration Form: Child Abuse:		
Disclosure: Act 31 Confirmat	tion phone/email:	Cleared Level: