



Cambrian School District Volunteer Code of Conduct

Name: _____
(Print Last, First name)

By volunteering with the Cambrian School District, you have a responsibility to the District and to your fellow volunteers, to adhere to certain rules of behavior and conduct. The purpose of these rules is not to restrict your rights, but rather to be certain that the learning environment is not compromised. When a person is aware that they can fully depend upon others to follow the rules of conduct, then our organization is a better place to work for everyone. Volunteers should become familiar with the specific rules at the site(s) at which they volunteer.

Please review and *initial* the following for your understanding:

Immediately upon arrival, I will sign in and out at the office or the designated sign-in station.

I will wear or show a volunteer identification badge whenever volunteering at the school.

I agree to develop a partnership with an assigned teacher or staff member.

I will become familiar with the bell schedule at the school.

I will follow the school's chain of command and protocol.

I will only use adult bathroom facilities.

I agree to abide by all applicable school rules and District policies and procedures.

I agree never to be alone with individual students when not in the presence of a staff member.

I will not solicit outside contact with students.

I agree not to exchange telephone numbers, home addresses, email addresses or other home directory information with students for any purpose.

I will maintain confidentiality outside of the school about the school learning environment, including all records and/or observations regarding students.

I will always report suspected Child Abuse to the Principal/Designee immediately.

I agree not to transport students without the written permission of parents or guardians and with the expressed permission of the school or district.

I understand it is unlawful for me to photograph, video or otherwise record students and staff.

I will not disclose, use, or disseminate student photography or videos or personal information about students, self or others in any format including electronic formats (e.g. social networks).

I agree not to post, transmit, publish or display harmful or inappropriate matter that is threatening, obscene, disruptive or sexually explicit or that could be construed as any form of harassment.

I will not bring younger children to school during my volunteer hours.

My signature indicates I have read and agree to comply with the District Volunteer Code of Conduct and Volunteer responsibilities at all times or cease volunteering immediately.

Print Name of Student/Grade Level

Print Name of Child's Teacher

Print Name of School District Volunteer

Relationship of Volunteer to Student/School

Signature of School District Volunteer

Date

Signature of Principal

Date

In the event of medical emergency, please contact:

Name

Relationship

Telephone

Medical Insurance Carrier (e.g. Blue Cross)

Policy Number