

# Addison Northwest School District Volunteer Agreement and Authorization Form

## AGREEMENT

This agreement is hereby made between the ANWSD and the individual named below to perform volunteer service.

**Please Print:**

1. Name of Volunteer: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Phone Number: \_\_\_\_\_ Email of Volunteer: \_\_\_\_\_
4. Check box to identify your Primary School Location:  Ferrisburgh Central School  Vergennes Union Elementary School  
 Vergennes Union High School  Walden Program or  Other: \_\_\_\_\_
5. Date of volunteer service: \_\_\_\_\_ 2023 - 2024 \_\_\_\_\_ School Year
6. Area(s) of volunteer services to be performed: \_\_\_\_\_

**Check a box to indicate the level of volunteering you are seeking:**

7. **Requesting consideration for:**
  - LEVEL 1 - "Non-Classroom Volunteer Only"** does not have access to students and volunteers on the peripheral of the school or is in the school as an invited guest/volunteer under the continuous supervision of an ANWSD employee. Example: a Guest Speaker or a person or club member working on a project/program on the weekend or at a school-sponsored event
  - LEVEL 2 - "Classroom Volunteer Only"** has access to students and is always under the supervision of an ANWSD employee and is never alone with a child while they are volunteering (*Requires a NCPA-VCIC Background check, Adult and Child Abuse Registry Check, FBI National Record Check, & enrollment in VCIC Subscription Service.*)
  - LEVEL 3 - "School-Based Volunteer"** has access to students and may be alone with a child while they are volunteering. This includes **Tutor, Reading Buddy, Coach, or all Field Trip Chaperone** (*Requires a NCPA-VCIC Background check, Adult and Child Abuse Registry Check, FBI National Record Check, enrollment in VCIC Subscription Service, & Fingerprinting.*)

## ACKNOWLEDGEMENT AND AUTHORIZATION

**Please read before signing below.**

- I understand that my volunteer services may only commence after the completion of the background checking process, I understand that my ability to volunteer would be contingent upon satisfactory background check results.
- I understand that depending on my level of volunteering I may need additional criminal record check through the Vermont Criminal Information Center (VCIC) and FBI Fingerprinting. If needed, I understand that I will be required to provide releases and other information necessary to complete these checks.
- I understand that I will be automatically disqualified from volunteering if my name appears with a substantiated report of abuse or neglect of a child or an adult. I also understand that I may be disqualified if I have a criminal conviction which places student at risk. In the event the District receives notice of conviction or receives a substantiated report of abuse or neglect, you will receive written notice of the disqualification and I shall be afforded an opportunity to request a review of the substantiation with the Agency of Human Services (AHS) or with the Vermont Department of Public Safety.
- I understand that the VCIC costs associated with my background checks shall be paid to the ANWSD in the amount of \$11.25. I also understand that if I do not log any volunteer time during a school year that my volunteer status will be changed from active to inactive. Inactive volunteers are subject to renewing the process including paying for a new background check and possible fingerprinting depending on the volunteer level.
- I understand that it is the responsibility of the Superintendent or their Designee to accept or not accept specific individuals as volunteers, and all decisions related to the continuation of a volunteer's service. I further understand that the decision of the Superintendent or their Designee in this matter is final.
- I understand that I am an unpaid volunteer and I understand that I am not an employee of ANWSD.
- I understand that all ANWSD students have the right to privacy. I also understand that it is not appropriate for me to share information about a student with members of my family or with the public.
- I also understand that if a student discloses to me any report of abuse or neglect that I will report this information to the classroom teacher or the principal of the school in a timely manner.

Volunteer's Signature:

Date:

School Official's Signature:

Date: