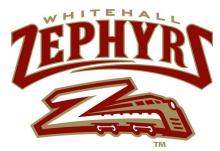
Volunteer Application/Agreement

Volunteer Position Sought – Please circle all that apply:

Coach, Band, PTO Plus, Classroom
Other:



Whitehall-Coplay School District

2940 MacArthur Road Whitehall, PA 18052 610-439-1431

Name					
	(Last)	(First)	(Middle)		
Address					
	(Street)		(City)	(State)	(Zip Code)
Telephone 1	Number				
Email Addr	ress:				

VOLUNTEER CONFIDENTIALITY AGREEMENT

It is the policy of Whitehall-Coplay School District (WCSD) to provide our employees and students with a level of privacy and confidentiality with any information concerning any of our employees or students.

On a daily basis, a volunteer may have access to confidential information (oral, written or computer generated, not otherwise available to the public at large) about employees or students, their families and/or personal business.

All student records, including demographics, assessment information, and staff observations and/or comments are considered confidential documentation.

I agree that I will not discuss any confidential information in any public areas, hallways, gathering spaces, etc., either on or off school premises. I also agree as a volunteer and child mandated reporter that I will contact 1-800-932-0313 (Child Abuse Hotline) to report any concerns for child welfare and/or safety (overheard statements, visible marks, child statements, etc.) as required by law.

I HAVE READ THIS CONFIDENTIALITY AGREEMENT	AND AGREE TO ITS TERMS AND MAY NOT BEGIN				
VOLUNTEERING UNTIL ALL REQUIRED CLEARANCE	S/DOCUMENTS HAVE BEEN SUBMITTED TO				
ADMINISTRATION.					
(Date)	(Signature)				
DO/LU 8-2020					