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January 29, 2015 2:48 PM

1 Attachment, 47 KB

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STATE COLLEGE AREA SCHOOL DISTRICT

CLASSROOM VOLUNTEER INFORMATION CHECKLIST

The Classroom Volunteer Information website provides each volunteer with important information relating to district procedures and expectations. Completing this form confirms that you have reviewed and understand the items listed below.

Please go to www.scasd.org/volunteer to read the policies listed below. Then complete this form and return it to your classroom teacher or building secretary. If you have any questions, please contact Community Ed at 231-1062 or email volunteers@scasd.org.

By signing this document, you confirm that you have reviewed the items listed below and understand all pertinent volunteer responsibilities.

- SCASD Revised Nondiscrimination Statement: (See Policies 103 and 104 revised 7-25-11 for complete information.) *The State College Area School District is an equal opportunity education institution and will not discriminate on the basis of race, color, age, creed, religion, gender, sexual orientation, gender identity, ancestry, national origin or handicap/disability in its activities, programs, or employment practices as required by Title VI, Title IX, Section 504, and Americans with Disabilities Act. For information regarding civil rights, grievance procedures and services, or activities and facilities that are accessible to and usable by persons with disabilities, contact the Compliance Officer, State College Area School District, 131 West Nittany Avenue, State College, PA 16801, (814) 231-1051.*
- Policy 207 Confidential Communications
- Policy 218.1 Weapons
- Policy 222 Smoking and Tobacco Products
- Policy 227 Drug and Alcohol Policy
- Policy 246 Wellness

- Policy 248 Pupils Sexual Harassment
- Policy 249 Anti-Harassment Policy
- Policy 806 Child Abuse Policy & Guidelines (currently being revised)
- Policy 907 School Visitors

Signature _____ Date _____

Name Printed _____

Please complete and return this document to your classroom teacher or the building secretary prior to volunteering.

TEACHER NAME _____

SCHOOL YEAR _____

ROOM NUMBER _____