

WEST YORK AREA SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED:

REVISED:

916-AR-0 POSITION VOLUNTEER APPLICATION PACKET

In accordance with Board Policy 916, the School Board, staff, and students recognize that volunteers can make valuable contributions to the District's educational, athletic, and cocurricular programs. This regulation covers the application, recommendation, and use of **Position Volunteers**.

A **Position Volunteer** is an adult who is applying for or holding an unpaid position with a school or program, activity or service, as a person responsible for a child's welfare or having direct volunteer contact with children. Examples include, but are not limited to, field trip chaperones, coaches, activity advisor, recess aides, etc.

Generally speaking Guest Volunteers do not have direct supervision of children. Examples include, but are not limited to, an adult assisting with a classroom celebration, participating in Career Day, working concession stands, etc. See 916-AR-1 for more information and/or a Guest Volunteer Application Packet.

1. Recruitment:

- a. The building principal and athletic director are responsible for recruitment of Position Volunteers.
- b. A list of all board approved Position Volunteers will be kept and maintained in the Human Resources Department.
- c. A list of board approved Position Volunteers assigned to athletics will also be kept in the Athletic Director's office.

2. Orientation:

- a. Each Position Volunteer will participate in an appropriate orientation program as defined by the building principal, athletic director, or supervising employee (e.g., teacher), and become familiar with Board Policy 806 - Child Abuse.

3. Evaluation/Renewal:

- a. All volunteers are subject to all regulations, board policies, and procedures of the West York Area School District.
- b. Position Volunteers are approved on an annual basis. His/Her approval expires no later than June 30th of the school year.
- c. The building principal, athletic director, or supervising employee (e.g., teacher) is responsible for reviewing a volunteer's performance and determining if he/she should remain in the assignment and/or be renewed for the following school year.

Position Volunteer Application/Approval Process

1. The prospective Position Volunteer is responsible for submitting the following to be considered for Position Volunteer approval.
 - Obtains this packet from the respective school building office personnel, athletic director, or downloads it from the District's website.
 - Completes the Volunteer Disclosure Statement, Volunteer Application, and reads and signs the Release of Liability and Indemnity Contract.
 - If the prospective volunteer's Pennsylvania Child Abuse History Clearance and Pennsylvania Criminal History Record Check that are less than sixty (60) months old, he/she must obtain updated clearances.
See Instructions for Obtaining Clearances for more information.
 - If the prospective volunteer has not lived in Pennsylvania for the last ten (10) years, he/she must obtain an updated Federal Criminal Record Check. See Instructions for Obtaining Clearances for more information.
 - Upon receipt of all appropriate clearances, the prospective volunteer must submit the following documents to the building principal or athletic director.
 - _____ Volunteer Disclosure Form
 - _____ Volunteer Application
 - _____ Signed Release of Liability and Indemnity Contract
 - _____ Pennsylvania Child Abuse History Check (less than 60 months old)
 - _____ Pennsylvania Criminal Record Check (less than 60 months old)
 - _____ Federal Criminal Record Check (**Only** if not a PA resident for the last 10 years)
2. **Tuberculous Screening:**

Upon receiving a prospective volunteer's completed packet to include either the building principal's or athletic director's approval on the application, human resources staff will contact the prospective volunteer with authorization to receive a district-paid tuberculous screening test. A negative screening result is required **prior** to board approval.
3. **Board Approval:**

Position Volunteers **must** be approved **prior** to beginning. The Board normally holds a voting meeting on the third Tuesday of the month, except July and December. Human resources staff must have your completed pack, including negative tuberculous results, no later than noon on the Thursday prior to the third Tuesday.
4. **Identification Badge:**

An identification badge and lanyard will be issued to each Position Volunteer after being Board approved. This badge includes your photo and a sticker that helps staff, students, and members of the public know you are approved to volunteer in the current school year. This badge **must** be worn at all times when you are serving in your volunteer capacity.

**WEST YORK AREA SCHOOL DISTRICT
VOLUNTEER DISCLOSURE FORM**

Section 1. Personal Information

In accordance with Board Policy 916, all volunteers must have a disclosure form on file in the building where services are provided. Please complete the following information and return it to the building in which you are volunteering.

Name: _____ Phone: _____

Address: _____

Name of Child: _____ School: _____ Grade: _____

Please describe what you will be doing while volunteering: _____

Name of employee with whom you will be working: _____

- I have been provided with a copy of Board Policy 916 – Volunteers
- As a volunteer to the West York Area School District, I understand that I am **not an employee** and will not receive any monetary compensation for the work that I perform.
- I agree to follow all safety rules and all instructions as a volunteer without formal or due process proceedings.
- I understand that in the course of volunteer service with the District, I have a responsibility to maintain the confidentiality of any employee or student information that I may have available to me in any form. I understand that it is my responsibility to assure rights and confidentiality of information, both written and verbal. I understand that in the performance of my duties, I am not to discuss academic or other confidential information regarding students or employees with anyone. Any breach of confidentiality will be carefully reviewed and, if substantiated, could result in termination of volunteer involvement with the District, and may result in legal action.
- By checking this box, I state that my Child Abuse History Certification and PA Criminal Background Certification clearances are up to date and were obtained within the last sixty (60) months.
- By checking this box, I state that I have lived in the state of Pennsylvania for the last 10 years. (A Federal Criminal History Report must be obtained if you have lived in PA less than 10 years)
- My signature below indicates that I understand the conditions stated above, that I have been provided the abovementioned policy, that I will follow all applicable rules, procedures, policies and instructions, and that all information provided by me is true. I have read and understand the policy and that I hereby agree to comply with and be bound by the policy.

Volunteer

Date

VOLUNTEER DISCLOSURE FORM (CONTINUED)

Section 2. Report of Arrest or Conviction

[] By checking this box, I report that I have been arrested for or convicted of an offense enumerated under 24 P.S. §1-111 (e) "Reportable Offense(s)." See below for a list of Reportable Offenses. If you have none to report, proceed to Section 3 of this form.

For any arrest or conviction of any Reportable Offense, specify in the space below (or on additional attachments if necessary) the crime for which you have been arrested or convicted, the date and location of the arrest/conviction, and the applicable court.

Section 3. No Arrest or Conviction

[] By checking this box, I state that I have never been arrested for or convicted of any Reportable Offense.

Section 4. Certification

By signing this form, I certify under the penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a Reportable Offense, shall subject me to criminal prosecution under 18 Pa. C.S. §4904, relating to unsworn falsification to authorities.

Volunteer

Date

LIST OF REPORTABLE OFFENSES

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

(1) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

- Chapter 25 (relating to criminal homicide)
- Section 2702 (relating to aggravated assault)
- Section 2709 (related 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 rape)
- 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 exposure)
- Section 3126 (relating to indecent assault)
- Section 3127 (relating to indecent exposure)
- Section 3129 (relating to sexual intercourse with an animal)
- Section 4302 (relating to incest)
- Section 4303 (relating to concealing the death of a child)
- Section 4304 (relating to endangering the 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 materials and performances)
- Section 6301(a)(1) (relating to corruption of minors)
- Section 6312 (relating to sexual abuse of children)
- Section 6318 (relating to unlawful contact with 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 in clauses (1) and (2) 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.

POSITION VOLUNTEER APPLICATION

*A **Position Volunteer** is an adult who is applying for or holding an unpaid position with a school or program, activity or service, as a person responsible for a child's welfare or having direct volunteer contact with children. Examples include, but are not limited to, field trip chaperones, coaches, activity advisor, recess aides, etc.*

Name: _____ Date: _____

Address: _____

Email: _____ Phone: _____ School Year: _____

Please describe what you will be doing while volunteering: _____

Please check all areas which you are interested in volunteering.

Classroom(s) – Select Building(s)

- | | | |
|---|--|---|
| <input type="checkbox"/> Wallace (Grades K-1) | <input type="checkbox"/> Lincolnway (Grades 2-3) | <input type="checkbox"/> Trimmer (Grades 4-5) |
| <input type="checkbox"/> Middle School (Grades 6-8) | <input type="checkbox"/> High School (Grades 9-12) | |

Field Trip(s) – Select Building(s)

- | | | |
|---|--|---|
| <input type="checkbox"/> Wallace (Grades K-1) | <input type="checkbox"/> Lincolnway (Grades 2-3) | <input type="checkbox"/> Trimmer (Grades 4-5) |
| <input type="checkbox"/> Middle School (Grades 6-8) | <input type="checkbox"/> High School (Grades 9-12) | |

Co-curricular/Athletic – Secondary Only

- | | | | | |
|---------------------------------------|--|--------------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Band | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Golf | <input type="checkbox"/> Softball | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Drama | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Swimming | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Field Hockey | <input type="checkbox"/> School Play | <input type="checkbox"/> Tennis | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Football | <input type="checkbox"/> Soccer | <input type="checkbox"/> Track | |

EDUCATIONAL/RELATED EXPERIENCE: _____

VOLUNTEER:

Date Position Volunteer

APPROVED BY:

Date Human Resources Director

Date Building Principal

Date Athletic Director (if applicable)

RELEASE OF LIABILITY AND INDEMNITY CONTRACT

AND, in consideration of being allowed to act as a volunteer at no cost to the West York Area School District, Whereby my child and/or other children may enhance their education, I do hereby release and forever discharge the West York Area School District and all other volunteers, all employees and agents of the District, and all students of the District from any and all claims, demands, actions, causes of action and suits at law or equity arising out of or in any way connected with the Volunteer Program of the West York Area School District and my presence in or on District property.

I further agree that I enter this Volunteer Program of my own free will, to serve without pay, understanding that I am not an employee or agent of the West York Area School District and therefore I am not covered by any of its insurance programs or policies and therefore I assume all responsibility for any injury, accident, or illness that may occur to me during my volunteer service and release the West York Area School District, its agents, or employees, from any and all liability from the same, and hereby agree to indemnify them and save them harmless for any sums that may be required to pay on my account.

I also agree that a recommendation from the building principal or athletic director is required and that my acceptance as a volunteer is subject to approval by the Superintendent and Board of Directors.

This release and indemnity is given voluntarily and knowingly with full understanding of its meaning and with my full consent to be legally bound hereby:

NOTE: West York Area School District (WYASD) prohibits volunteers from being in a romantic relationship with any WYASD student.

Date

Volunteer's Signature

Date

Witness (WYASD Personnel)

VOLUNTEER CONFIDENTIALITY AGREEMENT

You have requested to volunteer at the West York Area School District for the purposes indicated on your application. We appreciate your willingness to participate and are confident that our students will benefit from your participation in our programs.

Please remember that personal information about our students is protected by Federal and State regulations. In other words, no information that could personally identify a West York student can be shared with anyone else. As a volunteer in our District, you are required to abide by these regulations by not discussing personal information about students. If you have any questions about compliance with Federal and State regulations, you should discuss it with the principal of the building in which you are volunteering. Your initials below indicate your understanding of the need to comply with regulations regarding student confidentiality.

Date

Volunteer's Signature