

Valley View 365U Observation Form

Please complete and upload with your Request for Observation Hours.

The student's name must match their driver's license or state ID

First Name:_____ Middle Initial:_____

Last
Name:_____ D.O.B.:_____

E-mail Address:_____ Phone Number:_____

Address:_____

City:_____ State:_____ Zip Code:_____

Emergency Contact:_____ Phone:_____

Language(s) Spoken: _____

School(s) where you are requesting to observe:_____

College or University:_____

Criminal Conviction Information:

Have you ever been convicted of a felony related to violence?	☐ Yes ☐ No
Have you ever been found under the Juvenile Court Act to be a perpetrator of sexual or physical abuse of any minor under 18 years of age?	☐ Yes ☐ No
Have you ever been convicted of a felony related to weapons charges?	☐ Yes ☐ No
Have you ever been convicted of a felony related to crimes against/involving children?	☐ Yes ☐ No

Waiver of Liability

The School District does not provide insurance coverage to non-District personnel serving as observers for the School District. The purpose of this waiver is to give notice to prospective

observers that they do not have insurance coverage by the School District and to document the observer's acknowledgment that they are completing observation hours at their own risk.

By signing below:

You acknowledge that the School District does not provide insurance coverage for the observer for any loss, injuries, illness, or death resulting from the observer's unpaid service to the School District. You agree to assume all risk for death or any loss, injury, illness, or damage of any nature or kind, arising out of the observer's supervised or unsupervised service to the School District. You also agree to waive any claims against the School District, or its officers, School Board Members, employees, agents, or assigns, for loss due to death, injury, illness, or damage of any kind arising out of the observer's supervised or unsupervised service to the School District.

Observer Name (please print)

Observer Signature and Date
