



300B Volunteer Agreement Form

Thank-you for offering your time and skills to support student learning!

Name of Volunteer: _____ Volunteer Position: _____

School: _____ Class: _____

Reports to: _____

Criminal Reference Check: Not required for this position Required and attached

As Principal or designate, I agree to:

- Provide for the orientation and ongoing supervision of the volunteer (in accordance with the NLESD Volunteer Policy).
- Inform the volunteer, where possible, of all school schedule changes.
- Ensure that an education professional is responsible for the overall supervision and evaluation of volunteers. The level of supervision will be based on whether it is a low, medium, and high risk setting.
- Ensure that, without teacher direction, volunteers are not responsible for the supervision of students or program delivery, and are not involved in any evaluation of students or school personnel or program.
- Ensure that volunteers are not given access to personal information regarding students or staff, unless it is essential to the performance of their duties.
- Ensure that all forms and personal information collected through the volunteer screening process will be treated as confidential, and will be collected, maintained, used, disclosed and disposed of appropriately.

As a Volunteer, I agree to:

- Perform duties as assigned with no expectation of remuneration.
- Notify the appropriate person at school as soon as possible if I cannot volunteer at my scheduled time.
- Respect the confidentiality of all information about students and teachers, ensure that this information is used only in the context of the volunteer activity and not for any other purpose, and return all personal/confidential information to the school/my supervisor for appropriate storage or disposal.
- Neither discipline nor evaluate students, but will report concerns to my supervisor or other appropriate school personnel.
- Treat others with dignity and respect.
- Follow dress and behaviour codes as established by the school.
- Abide by all NLESD policies and procedures relating to the volunteer working being undertaken.

I have been made aware that volunteers are insured under the General Commercial Liability Policy while acting at the direction of, and within the scope of their duties for the NLESD. I am also aware that the Board's insurance does not include a loss of income provision should the volunteer sustain an injury that prevents him/her from resuming normal employment.

Volunteer's signature: _____ Date: _____

Principal or designate: _____ Date: _____