

Calhan School District RJ-1 Volunteer Approval Checklist

Date: _____

Name: _____

Phone: _____

Email: _____

- ____ 1. The volunteer has been given a copy of Calhan School District RJ-1 School Volunteer Board Policy UOC.
- ____ 2. The volunteer has been given a copy, signed, and agrees to the terms of the Calhan School District RJ-1 Volunteer Agreement Board exhibit UOC-E-1, UOC-E-2, and UOC-E-3.
- ____ 3. The volunteer has completed the Calhan School District RJ-1 *Background Screening Notification & Authorization Form* which allows the district to perform an electronic CBI background check approximately every 6 months while the volunteer is active in the school district.
- ____ 4. The volunteer has paid a \$5.00 fee for the _____ school year which helps cover the cost of the CBI check.
- ____ 5. The CBI background check is valid for 2 years. Expiration Date: _____
- ____ 6. The volunteer attended the Volunteer Information & Training on _____

For Office Use Only

CBI Fee: _____ Method of Payment: _____ Date: _____

CBI Expiration: _____

Approved: Yes _____ No _____ Date: _____

Volunteer Notified By _____ Date: _____

Administrator Signature: _____ Date: _____

**BACKGROUND SCREENING
NOTIFICATION & AUTHORIZATION FORM**

The purpose of this form is to notify you that a background report will be run on you in the course of consideration for your volunteer service with Calhan School District RJ-1.

Volunteer Information (Complete the following information as accurately as possible. Please Print or Type.)

Last Name		First Name	Middle Name
Social Security Number	Date of Birth	Previous Names (maiden/marriage, etc) Date Changed:	
Driver's License Number	State of Issue	Date Changed:	

Address History (List up to 7 years beginning with your current address. Include city, country, postal code and dates of residence.)

Address #1				
Date From:		Date To:		
Street Address		City	State	Zip Code
Address #2				
Date From:		Date To:		
Street Address		City	State	Zip Code
Address #3				
Date From:		Date To:		
Street Address		City	State	Zip Code

BACKGROUND SCREENING AUTHORIZATION

As part of the volunteer screening process, I authorize all corporations, former employers, educational institutions, law enforcement agencies, city, state, county and federal agencies, military services and persons to release information they may have about me to the person or company with which this form has been filed, or their agent, Background Information Services, Inc. This releases the aforesaid parties from any liability and responsibility for collecting this information.

I specifically authorize the release of my motor vehicle records maintained by law enforcement agencies, city, state, county and federal courts, or any other state or local agency.

This releases the aforesaid parties from any liability and responsibility for collecting the above information. I understand that these files may contain negative information about my background, mode of living, character, and personal reputation. This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested. I understand that personal information being collected is necessary to conduct an investigation of my background and that information will be used solely for this purpose.

ELECTRONIC SIGNATURES

I understand that an electronic signature to be valid as the original. Based on certain information repository requirements, I may be asked to provide an original signature to authorize the investigation of my background. I further acknowledge that a facsimile (FAX) or photographic copy of this release will be valid as the original.

Volunteer Signature: _____ Date: _____

OFFICE USE ONLY:

Background Check Completed by:	Background Check Date:	Approved by Superintendent for Volunteer:
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School Volunteers

The Board of Education recognizes the need to develop a volunteer program to support district instructional programs and extracurricular activities. The purpose of the volunteer shall be to:

1. Assist employees in providing more individualization and enrichment of instruction.
2. Build an understanding of school programs among interested citizens, thus stimulating widespread involvement in a total education process.
3. Strengthen school/community relations through positive participation.

A volunteer is a person who works on an occasional or regular basis at school sites or other educational facilities to support the efforts of professional staff. Such a volunteer worker shall serve in that capacity without employee benefits of any type except for Workers' Compensation and liability protection as provided by state law.

Use of volunteers within the district is not to conflict with or replace any regular employee.

Volunteers must be at least 21 years old. Volunteers are expected to comply with all policies and regulations set forth by the district.

Volunteers shall be insured for industrial injury/illness and liability under the District insurance programs.

Adopted: March 20, 2001

Revised: April 15, 2014

LEGAL REF.: C.R.S. 8-40-202 (Workers' Compensation Act)
C.R.S. 24-10-103 (4)(1) (Colorado Governmental Immunity Act)

CALHAN SCHOOL DISTRICT RJ1 VOLUNTEER APPLICATION

Name: _____

Mailing/Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Emergency Contact: _____

Do you have any health problems or conditions we should be aware of? Yes ____ No ____

Physical Limitations: _____

Special Requests: _____

Hours/Days Available: _____

Have you ever been convicted, plead guilty or entered a plea of nolo contendere to a felony or misdemeanor?

Yes ____ No ____ If yes, please explain:

Calhan School District RJ1 appreciates your willingness to assist us in making our school the best it can be. By signing this form, you allow the District to do a background check in order to verify the information contained and agree to sign the Confidentiality Agreement.

Signature _____

Date _____

Adopted: March 7, 2017

School Volunteer Agreement Form

THIS AGREEMENT, made and entered into this day of _____ by and between Calhan School District RJ-1 ("District") and _____ ("Volunteer") to assist with (name of program or activity) _____.

WHEREAS, the District and the Volunteer believe that a written agreement is beneficial to describe their relationship and to serve as the basis of effective communication between them.

NOW, THEREFORE, the District and the Volunteer, in consideration of the premises and the covenants herein specified, agree as follows:

1. **RESPONSIBILITIES OF VOLUNTEER.** Volunteers shall be 21 years of age or older. Volunteer shall assist and be under the direct supervision of designated licensed employee(s) of the District and Volunteer shall follow the direction and assignments given by Volunteer's supervisors or the Board of Education. Volunteer shall keep the designated licensed employee(s) fully and completely informed of all activities and actions taken by Volunteer while performing assigned duties. Volunteer shall treat all information gained about students, teachers, or parents as confidential.
2. **EMPLOYMENT STATUS.** Volunteer is not an employee, and shall not be compensated for services. The District shall provide coverage to Volunteer under its liability insurance policies.
3. **TERM.** This Agreement shall continue from _____ to _____, unless earlier terminated as provided herein.
4. **RESPONSIBILITIES OF SCHOOL DISTRICT.** The District shall provide a designated licensed employee to supervise and direct Volunteer's duties and activities.
5. **TERMINATION.** Either party may terminate this Agreement effective immediately upon notice to the other party.
6. **BOARD POLICY.** This agreement is and shall be subject to all applicable state and federal laws and regulations, and to Board policies now in effect or as adopted by the Board.

IN WITNESS WHEREOF, the District has caused this Agreement to be approved on its behalf of a district administrator, and the Volunteer has approved this Agreement effective on the day and year first above written.

Administrator Approval

Volunteer

Revised: March 7, 2017

Community/Student Volunteer Confidentiality Agreement

As a community/student volunteer assisting within the Calhan School District, you have been authorized by the Superintendent or the Superintendent's Designee to act as a school official subject to the direction and control of the District's administrators and teachers. As a school official, you may under limited circumstances have access to student education records in connection with your authorized duties. Student education records include all records, files, documents, and other materials that contain personally identifiable information on any student, as well as the personally identifiable information itself (including student grades).

By signing below, you agree to maintain the confidentiality of all student education records that you generate or to which you are given access as an authorized community/student volunteer. This means that you agree not to disclose student education records or personally identifiable student information in such records to any person other than the school administrator(s) and/or teacher(s) with whom you are working. You will not take or post students' pictures on the internet, Facebook, or any other form of social media due to privacy rules. You understand and agree that your failure to maintain the confidentiality of all student personal and educational records to which you are given access may disqualify you from further service as a community/student volunteer in the District.

Thank you for your service and for your compliance with these important confidentiality requirements.

Signature

Date

Name (Please print)

Adopted: February 21, 2017