

HORIZON SCHOOL DIVISION POLICY GFA - Volunteers VOLUNTEER REGISTRATION FORM

SCHOOL YEAR:				
Mr./Mrs./Ms.:	Surname:	Given Names:		
SCHOOL NAME:				
ADDRESS:		Postal Code:		
Telephone Numbers: Hor	me:	Work:		
A. VOLUNTEER SECU	IRITY DISCLOSURE:			
A. VOLUNTEER SEC	KITT DISCLOSURE.			
Act, Food and Drug A	Act, or Firearms Act of Cana	ffence under the <i>Criminal Code</i> , <i>Narcotic Control</i> da, or the criminals laws of any other country? e not required to respond "Yes" to this question).	Yes	No
equivalent legislation		n or order under the <i>Child Welfare Act</i> of Alberta or untry? (If you answer "Yes" to this question, you ong with this form).	Yes	No
Are there any conditions which might cause concern regarding your suitability as a volunteer?			Yes	No
If the answer to any o pertinent information:		s" provide details including dates, depositions, and an	y other	
	one of the above questions zon School Division No. 67	will not automatically exclude an applicant from beco.	ming a	

As a volunteer, we would like to advise you of the following conditions:

- 1. Confidentiality is of the utmost importance in the school setting in order to ensure that the dignity and worth of students, parents, volunteers and staff is honored.
- Any information collected, used, generated and stored by Horizon School Division including student, instructional, financial or administrative information is strictly confidential and is to be used only in the performance of volunteer duties.

- 3. You may not disclose, communicate, publish, take, alter, copy, interfere with or destroy any information unless you are specifically authorized to do so by the teacher or principal.
- 4. You must notify the principal of any new criminal charges at the time the charge is made.
- 5. The teaching and administration staffs are responsible for student learning and discipline.
- 6. You can assist in enhancing the learning environment by working cooperatively with the school team.
- 7. You are responsible to the Principal or teacher for all actions relating to students. You shall NOT:
 - a) diagnose educational needs of students;
 - b) prescribe remediation;
 - c) evaluate the results of instruction;
 - d) carry out any instructional responsibilities unless under the direct supervision of a teacher;
 - e) disclose information about a student(s) or staff member(s) except through appropriate channels.

By signing this volunteer registration form I am agreeing to the conditions outlined above, as well as verifying that all

8. Failure to comply with these conditions or Horizon School Division policies may result in termination of your position as a volunteer.

information provided is accurate.	
Signature:	Date:
 B. COMPLETE THE FOLLOWING ONLY IF YOUR TO BE ALONE WITH STUDENTS: 1. Please list at least two references with whom the science 	R VOLUNTEER POSITION PUTS YOU IN A POSITION hool may check:
Name:	Phone:
Name:	Phone:
2. I have submitted a Police Information Check include	ding a Vulnerable Sector Screening Check Yes No