



School District 27J

18551 E 160th Avenue

Brighton, CO 80601-3295

(303) 655-2818 FAX (303) 655-2966

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Office for Human Resources

Rebekha Grigsby

Volunteer Program

Coordinator

Thank you for serving as a volunteer for School District 27J. We appreciate your time and dedication to our students. School District 27J appreciates all volunteers who commit time on a regular or occasional basis to support the professional staff. The purpose of this Volunteer Agreement is to establish expectations for volunteers, which will help ensure that effective learning and teaching take place in a safe, secure and welcoming environment for students, staff and community members.

Please carefully read each item governing the terms and conditions of volunteer service in School District 27J. After you have read the agreement, please complete the required information and sign. If you have any questions, please contact me at the information provided above.

As a volunteer for School District 27J, I understand and agree to the following:

1. I understand and agree that as a School District 27J volunteer, I will be subject to the direction and control of the Principal of the school, Site Supervisor/Director, or their designees.
2. At all times, I will serve under the direct supervision of a school district staff member.
3. I will wear my identification badge at all times when I am providing volunteer services for School District 27J.
4. For every child I interact with or observe as a volunteer, I understand that I am obligated to report any known or suspected child abuse to the teacher, Principal, counselor, or Site Supervisor/Director.
5. I understand that I am NOT to contact parents, legal guardians or emergency contact persons unless directed to do so by the Principal, Site Supervisor/Director or their designees.
6. I will conduct myself in a friendly, courteous manner and not show partiality toward any student, and will remain neutral in my speech and actions with respect to religion and politics at all times that I am engaged in volunteer services with students.
7. I understand that I am to call the school directly if for any reason I can not fulfill my volunteer expectations.
8. I understand that it is my responsibility to inform the Principal or Site Supervisor/Director of any health/medical issues that may impair my ability to or prevent me from properly carrying out the duties and responsibilities of the volunteer service to which I have been assigned.
9. I understand and agree that as a School District 27J volunteer I am subject to all applicable School District 27J policies/regulations and to all directives from authorized School District 27J officials.
10. I understand that while performing my volunteer service, I am not considered an employee and am therefore not compensated or afforded insurance coverage under any district's insurance policies (ex: workers' compensation, general liability, errors and omissions, etc.). Also, in case of an automobile accident or physical damage to my person or property, I am not entitled to any liability coverage provided by the district.
11. As a volunteer in School District 27J, I may be authorized by the Principal or Site Supervisor/Director to act as a "school official" subject to the directions and control of the school's administrators and teachers. As a school official, I may, under limited circumstances, have access to student education records in connection with my service as a volunteer. Student education records include all names, addresses, 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 and test scores). I agree to maintain the confidentiality of all student education records that I may generate or to which I may be given

access as a volunteer. This means I agree not to disclose student education records or personally identifiable student information in such records to any person other than the school administrator(s) with whom I am working. I understand and agree that questions about the content of the student education records must be directed to the school administrator(s) with whom I am working. Should I inadvertently acquire any confidential information concerning students or staff members through the use of district technology, I understand the access of such information must be reported immediately to a building administrator. I will never take any confidential student records off campus. I understand and agree that my failure to maintain the confidentiality of all student education records to which I may be given access may disqualify me from further service as a volunteer in School District 27J.

12. I understand that prior to serving as a volunteer in School District 27J or any time during my service as a volunteer, the school district may conduct a background check on me for any reason. This background check may include obtaining a report from a reporting agency that may include information concerning my criminal history. By providing the information requested and signing below, I consent to School District 27J conducting a background check.

Full Legal Name: _____

Male: _____ Female: _____ Birth date: _____

Address: _____

City/Zip Code: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Days Volunteering: M T W Th F (Please circle all days that you currently volunteer)
Hours per week: _____
School: _____

I understand that by signing this agreement, I am aware of my responsibilities and parameters outlined in this agreement and will abide by the information provided in this agreement.
Signature: _____ Date: _____

Have you ever been charged with, arrested for, convicted of, pled nolo contendere to, or received a deferred sentence or deferred prosecution for a felony or a misdemeanor crime?

_____ **No** _____ **Yes**

If yes, please describe: (Use another sheet of paper if necessary)

Signature of Principal/Administrator Authorizing Volunteer: _____

School or Site: _____

Volunteer Interest Form
School District 27J
Reaching Out in All Directions
18551 E 160th Avenue
Brighton, CO 80601-3295
(303) 655-2900 FAX (303) 655-2818

Name: _____

Address: _____

Email: _____

Phone: H: _____ **C:** _____

School interested in volunteering: _____

Interested in Senior Tax Rebate Program? Yes _____

(Must be 60 years of age or older and own property in Adams County)

When do you prefer to work?

_____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri

_____ A.M. _____ P.M. _____ Either

How often do you prefer to work?

_____ 1-2 times per week _____ 3-5 times a week _____ Once a month

_____ Other: _____

I prefer:

_____ Day Care _____ Preschool _____ Elementary _____ Middle School _____ High School

_____ Central Administration

I would be most comfortable working with:

_____ Adults _____ Students

Type of Volunteer:

Parent Grandparent Family member
 Business Community member Senior Citizen
 Faith Community SD27J Student

Areas of interest for Volunteer Service: *(Please check all that apply)*

Reading Writing Math Science
 Language Arts/English Social Studies/History
 Foreign Languages English as a Second Language
 Special Education Specials areas: Art, Music, PE
 Computer Tutoring Library/Media Center
 Classroom Teacher Support Classroom Speaker
 Athletic Coach Clubs/Extra Curricular
 Field Trips Clerical Cafeteria
 Custodial Crossing Guards Playground

I can speak fluent:

Spanish French German Japanese Hmong
 Other: _____

Have you been convicted of a felony within the last seven years?

(Conviction will not necessarily disqualify you as a volunteer)

Yes No

If yes, please explain nature and date of offense: *(Use another sheet of paper if necessary)*



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Reaching Out in all Directions

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Office for Human Resources

Thank you so much for your time you have volunteered in the district this year. As we are preparing for next year we would like to have your feedback regarding the following questions. Please take a few moments to read and complete the survey. Once you have completed the survey, please return it to the principal. If you have any questions, please feel free to give me a call at the phone number listed above.

Please answer each question using the scale: 5 meaning strongly agree and 1 strongly disagree.

1. I feel welcomed and valued in my volunteer role.

5 _____ 3 _____ 1
Strongly Agree Strongly Disagree

2. I feel I have the support needed to solve any problems I may encounter during my volunteer experience.

5 _____ 3 _____ 1
Strongly Agree Strongly Disagree

3. I feel I have been well prepared for emergency situations within the school.

5 _____ 3 _____ 1
Strongly Agree Strongly Disagree

Please answer the following questions in the space provided:

1. What aspect or aspects of your volunteer experience have been best for you?

2. What suggestions or comments do you have to strengthen Brighton School's Volunteer Program?