



Windsor-Essex Catholic District School Board

APPENDIX A

APPLICATION FOR SCHOOL VOLUNTEER

SC:09

Name: _____ Phone: _____

Address: _____

Interests: _____

Skills: _____

Grade Preference: _____

STATEMENTS:

Training: I agree to follow the direction of the Principal/Teacher and accept training relating to the assigned duties.

Confidentiality: Whatever occurs in the classroom with regard to the programme, teacher or students, shall be considered in a confidential and a non-judgmental manner. No item of a critical or personal nature shall be discussed in school or in the community. Discussion about such school matters should occur only between the volunteers and the teacher(s)/principal. Any discussions outside the school about a student's special needs or programming shall be considered a breach of trust and confidentiality. I also understand that such a breach will result in my dismissal from the programme.

Confirmation of Suitability: I understand the Board's responsibility to ensure the safety of its students and formally state that nothing precludes me from serving as a volunteer in a school and that I have never been legally prohibited from contact with children.

Insurance: I understand that the Board's liability insurance applies only with respect to the duties assigned by the Principal.

I have read and understand the Board's policy and procedures on School Volunteers.

Signature of Volunteer

Date

Signature of Principal

Date