



**Palliser Regional Schools
Classroom Volunteer, Coaches and
Supervisors Registration Form**

SCHOOL YEAR: _____

Mr./Mrs./Ms.: _____ Surname: _____ Given Names: _____

SCHOOL NAME: _____

ADDRESS: _____ Postal Code: _____

Telephone Numbers: Home: _____ Work: _____

Email Address: _____

Please list any children or grandchildren registered in the above school?

A. VOLUNTEER SECURITY DISCLOSURE:

Have you ever been charged or convicted of an offence under the *Criminal Code, Narcotic Control Act, Food and Drug Act, or Firearms Act* of Canada, or the criminals laws of any other country? Yes No

(Individual who have been granted pardons are not required to respond “Yes” to this question).

Have you ever been the subject of an investigation or order under the *Child Welfare Act* of Alberta or equivalent legislation in any other province or country? (If you answer “Yes” to this question, you must submit a current Child Welfare Statement along 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 of the above questions is “Yes” provide details including dates, depositions, and any other pertinent information:

NOTE: “Yes” to any one of the above questions will not automatically exclude an applicant from becoming a volunteer within Palliser Regional Schools.

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

1. That 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.
2. That any information collected, used, generated and stored by Palliser Regional Schools including student, instructional, financial or administrative information is strictly confidential and is to be used only in the performance of volunteer duties.

3. That 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. That you must notify the principal of any new criminal charges at the time the charge is made or any other situation that calls into question your suitability as a volunteer.
5. That the teaching and administration staffs are responsible for student learning and discipline.
6. That as a volunteer you can assist in enhancing the learning environment by working cooperatively with the school team.
7. That you as a volunteer 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.
8. Failure to comply with these conditions or Palliser Regional Schools policies may result in termination of your position as a volunteer.

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

Signature: _____

Date: _____

B. COMPLETE THE FOLLOWING ONLY IF YOUR VOLUNTEER POSITION PUTS YOU IN A POSITION TO BE ALONE WITH STUDENTS:

1. Please list at least two references with whom the school may check:

Name: _____ Phone: _____

Name: _____ Phone: _____

2. I have submitted a Police Information Check including a Vulnerable Sector Screening Check Yes No