

VOLUNTEER APPLICATION FORM

School:		
JC11001.	encompacto med a la gon formació do los el el entregaciones. A sul serve descolação de la comissión de la estada de la sulfacto de la comisión de la comisión de la comisión	Any Information collected. Commission by confinencial and a second an
Name:		
Mailing Address:	Ty t hiller or styling he had spined shown	and the state of t
Telephone: (home)	(cell)	obtainimin jose saudunti
Email Address:	olg Stalks Philips word B. 43 Philippin Paus	
□ Voc	o any children registered at this school?	
□ No		
f yes, please list relationship to student(s):	
		,
Student	Relationship	
in See Dry Draffielt Laure pear School	ent manufacture, same manufacture pendente are armate	_
	The Agriculation of the Control of t	of Antiropy remains from
	relephone #	contact:
	Telephone #	
and line anisbedone bins yollian horist in	The second of th	n hamand care-of and agreement and agreement of the contract and a
mergency contact information:	Could return the damption of influencements of the countries of the countr	n through the light of the land of the lan
imergency contact information: Name:	Relationship:	n hamanist our seal stad a general season, a general season, and a general season, and a general season, and a general season and a sea
Emergency contact information: Name: Address:	Relationship:	n humanist survey and agency in humanist survey and agency and agency of the property and agency in the agency in
mergency contact information: lame: ddress: elephone: (home) to you as a volunteer, have any allergies, p	Relationship: (cell) (cell) this is a second control of the second control	the property of the control of the c
Emergency contact information: Name:Address: Telephone: (home) Do you as a volunteer, have any allergies, p	Relationship: (cell) (cell) this is a second control of the second control	n hamanist carried and agreement of volunteers and agreement volunteers and agreement volunteers and agreement of the agreement and the agreement of the agreem
Emergency contact information: Name: Address: Elephone: (home) Oo you as a volunteer, have any allergies, playare of? Please specify.	Relationship: (cell) (cell) this is a second control of the second control	prince and consider administrative and appropriate considerative and appropriate valuations and appropriate valuations and appropriate and app
Emergency contact information: Name: Address: Telephone: (home) Do you as a volunteer, have any allergies, paware of? Please specify. Optional:	Relationship: (cell) (cell) this is a second control of the second control	n concerns that we should be

Are y	ou a visible minority? Yes No Please identify:
Asav	olunteer, I fully understand and agree to the following:
•	School volunteer service is permitted at the discretion of the Principal.
	I will preserve the confidentiality of any personal information which I may see or hear in respect to students, parents, staff or administration. I will hold all such information in the strictest of confidence and I shall not use, copy or disclose such information to any other individual in whole or in part, in any manner or form, unless I have obtained the permission of the Principal.
•	Any information collected, used, generated, and stored by the school including student, instructional, financial, or administrative information is strictly confidential and is to be used only in the performance of volunteer duties.
•	I may not disclose, communicate, publish, take, alter copy, interfere with, or destroy any information unless I am specifically authorized to do so by the teacher or Principal.
	Teaching and administration staff are responsible for student learning and discipline.
	School administration, teaching and support staff have specific roles to play and it is important that the staff of a school operate as a team. A volunteer can assist greatly in enhancing student learning by working positively and cooperatively with the school team.
•	Failure to comply with these conditions and school board policy may result in termination of my position as a volunteer.
	nal Record Check/Vulnerable Sector Inquiry valid and satisfactory Criminal Record Check including a Vulnerable Sector Inquiry is required before volunteer
	oproval is confirmed. Please attach the original copy with your application from. See the English Language School
Вс	pard Volunteer Handbook for more information.
form i have r	ning this volunteer application from, I agree to the conditions outlined. I certify that the information given in this is true and correct and I agree that falsification or omission of information may result in my removal as a volunteer. I read, understand and agree to the English Language School Board <i>Volunteers in School</i> policy and procedure and the it volunteer handbook.
If und	er the age of 18 a parent or legal guardian must sign.
	ereby certify that I am the parent/legal guardian of, a minor, and that s/he has
	y permission to serve as a volunteer. As the parent/legal guardian, I understand and have full knowledge of the ture and extent of the risks involved with his/her participation as a school volunteer.
	you as a valuation, there may altered as physical assessment in an increase or liquid conceases that we should be
Signat	ure of volunteer or parent/legal guardian Date
	r office use only:
	Valid and satisfactory Criminal Record Check with Vulnerable Sector Inquiry te submitted: Date approved: