

FALLSBURG CENTRAL SCHOOL DISTRICT



2016-17 VOLUNTEER APPLICATION

PLEASE PRINT CLEARLY AND FILL OUT FORM COMPLETELY (* INDICATES REQUIRED FIELDS)

NOTE: New application is required every year. We encourage anyone, including FCSD employees, who might volunteer in our schools to fill this out! Thank you for helping us keep our students safe and our records accurate.

LIST SCHOOL(S) WHERE YOU WANT TO VOLUNTEER: _____

HAVE YOU VOLUNTEERED IN FCSD IN THE PAST?: YES _____ NO _____

SECTION 1: VOLUNTEER PERSONAL INFORMATION

*NAME: _____
FIRST LAST

*LIST BIRTH NAME AND ALL LAST NAMES: _____ *DATE OF BIRTH: _____

MAILING ADDRESS: _____ CITY: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

EMAIL: _____ DRIVERS LIC #: _____ STATE: _____

YOUR EMERGENCY CONTACT: _____ PHONE: _____

LANGUAGES: (List languages you are fluent in, can read or can write)

VOLUNTEER CATEGORY (Check one)

Parent Relative Guardian Community Member Host Family

SECTION 2: VOLUNTEER OPPORTUNITIES

HOW WOULD YOU LIKE TO VOLUNTEER? (Check all that apply)

FIELD TRIPS BOOSTER CLUB PTA/PTO

CLASSROOM

SCHOOL EVENTS

MENTORING

TUTORING/LEARNING SUPPORT

CLERICAL

OTHER (Please indicate area of interest) _____

VOLUNTEER AVAILABILITY: (Check all that apply)

Monday Tuesday Wednesday Thursday Friday No Preference AM PM

Grade Level: Pre K - K 1 - 3 4 - 6 7 - 8 9 - 12

Do you have any particular skills or qualities that would be helpful to our students? If yes, please describe:

SECTION 3: REFERENCES

Please provide 2 non-family members as personal references.

Name: _____ Phone #: _____

Name: _____ Phone #: _____

NOTICE: You must complete the Required Criminal History, New York State Education Department (NYSED) AND Division of Criminal Justice Services (DCJS) Check!

SECTION 4: APPLICANT DISCLOSURE – pursuant to NYCRR §80-1.11 and Part 87

- YES ___ NO ___ Have you ever been convicted of a crime relating to Driving Under the Influence (DUI) or drugs?
- YES ___ NO ___ Have you ever been convicted of ANY crime? (Convicted includes ALL instances in which a finding of guilty, a plea of guilty or nolo contendere, an Alford plea, or stipulation to the facts is the basis of conviction and/or all proceedings in which prosecution has been deferred or a sentence has been suspended or deferred.)
- YES ___ NO ___ Do you currently have any outstanding criminal charges or warrants against you in NY or in any other state or country?
- YES ___ NO ___ Have you ever been convicted of domestic violence or assault?
- YES ___ NO ___ Have you ever had findings made against you for domestic violence, abuse, sexual abuse, neglect, exploitation or financial exploitation of a child or a vulnerable adult in any civil adjudicative proceeding? (A civil adjudicative proceeding includes a judicial or administrative proceeding as well as findings by the Department of Social and Health Services or the Department of Health that you have not administratively challenged or appealed.)
- YES ___ NO ___ Have you ever been dismissed from a position or had disciplinary charges preferred against you?
- YES ___ NO ___ Have you ever resigned from employment while disciplinary action/charges were pending against you?
- YES ___ NO ___ Are there other aspects of your personal or professional history or prior job performance that are pertinent to you being a volunteer?

***REQUIRED INFORMATION FOR NYSED BACKGROUND CHECK: Male Female Race _____**

IMPORTANT: If you have answered **YES** to any of the questions above, **please attach a supplemental sheet with a brief explanation** and send it in a sealed envelope to the address below or email it to ikatz@fallsburgcsd.net. You will not be considered for volunteer placement until interviewed and approved by the Fallsburg Central School District.

Please check here if your explanation is already on file at the district office. _____

SECTION 5: NYSED CHECK & DECLARATION

Fallsburg Central School District (FCSD) conducts a multi-state background check on all volunteers. All volunteers **must** be cleared through the New York State Education Department (NYSED), Division of Criminal Justice Services (DCJS), and the Federal Bureau of Investigation (FBI). By signing this application, you are granting FCSD permission to conduct the background check. *If you do not sign below, we cannot process your request and you will be unable to volunteer.*

Under penalty of perjury, I hereby affirm that the information I have given in connection with this application, or in any part of the application process, including interviews, is complete and accurate to the best of my knowledge and I understand that providing any false or misleading statements or omissions in this process, will result in my removal from further consideration of volunteer placement or continued volunteer service.

It is understood that this application and supporting records become the property of the Fallsburg Central School District, which reserves the right to accept or reject it. I understand that this volunteer application will be valid for one (1) year from the date it is received. I understand that this time is spent in a volunteer capacity only. Employees of FCSD may not, as volunteers, perform any type of service that they are employed to perform by the district (Fair Labor Standards Act). I further agree to observe all rules, regulations and policies of the FCSD should my application be approved.

***SIGNATURE:** _____ ***DATE:** _____

Please return this form to the District Office at:
Fallsburg Central School District – ATTN: Supt. Office
PO Box 124, Fallsburg, NY 12733
845-434-6800



CODE OF CONDUCT FOR VOLUNTEERS

Thank you for your interest in volunteering in the Fallsburg Central School District. This information is provided for your safety as well as for the protection of the children with whom you will be working. Please review it carefully and ask any questions that may arise. We want the time you spend volunteering in a Fallsburg school to be a positive experience for all.

Relationships: For the protection of all, the relationship between you and all students with whom you interact as a volunteer must be kept appropriate at all times. Continuing your volunteer relationship through out-of-school contact, such as phone calls, home visits, or invitations to your home, social events, office, vehicle, or activities is not permitted. This prohibition, of course, would not restrict out-of-school contact with students who are family friends or known to you through other community contacts.

Appropriate touching: Handshakes, "high five's", an arm or hug around a shoulder are the only safe and friendly ways to touch a child when you are volunteering. For some children, or for some cultures, even these gestures may be unwelcome. No child should be subject to unwelcome touching no matter how well intended. If a child ever inappropriately touches you, please inform a staff member right away.

Communication: You are a role model. Your conversations with students and staff should demonstrate respect for others and avoid language that may be perceived as discriminatory, profane, sexist, or offensive. No student or staff person should ever be treated differently, spoken to disrespectfully or denied services on the basis of sex, race, religion, disability, age, creed, color, national origin, sexual orientation, or marital status. In addition, school personnel or volunteers cannot encourage or promote religious beliefs by class activities, comments or invitations to their place of worship.

Confidentiality: As a volunteer, you must respect and maintain confidentiality in regard to personal information obtained regarding a child or his/her family with certain exceptions. Reasonable suspicion of abuse, neglect, sexual abuse, illegal or dangerous activities should be shared with staff. Be assured they will follow up on the information.

Discipline: Any disciplining of a student should be left up to a staff member. Physical punishment is never permitted.

School safety plan: In the event of an emergency while you are on site (fire, tornado etc.) you need to be familiar with the Safety Plan of the building in which you volunteer. Each school will provide its Safety Plan to volunteers at orientation and training sessions.

Check in/out: All visitors, including volunteers, are required to sign in at the main office in the school and wear an identification badge while on campus.

Volunteer orientation & training: Volunteers may receive orientation to general building procedures, including an understanding of school policies, rules, and expectations; a tour of the campus; and instructions on what to do in the event of an emergency while on site. Specific training for the program each volunteer will be working in and instructions on how to communicate with the assigned staff member should also be provided.

I have read and understand the code of conduct required for all volunteers in the Fallsburg Central School District:

Name (Printed) _____

Signature: _____

Date: _____



CONFIDENTIALITY STATEMENT FOR VOLUNTEERS

We are pleased you are interested in volunteering in the Fallsburg Central School District. As you take on this very important role, we want to provide information to you related to confidentiality so that each person who works in our school will understand the importance of this issue and the privacy rights of our students and staff.

Volunteers observe students working at different levels and with different needs and challenges. Some students need extra support in academic areas, some need help in solving problems and others need help making appropriate behavior choices. These areas of support might be observed while helping students with academic learning or while in the hall, cafeteria, on the playground or other common areas of the school. Anytime you notice conflicts or difficulties that are not resolved by the students, please make sure a staff member is informed promptly. Please make sure any conversations that take place with a staff member related to a specific student's or group of students' needs are done privately (out of earshot of all students and other adults). Please understand that teachers are not free to discuss other students with you.

The Fallsburg Central School District appreciates it when volunteers report such incidents or concerns and also request that volunteers not speak of such incidents or concerns with anyone after having left the school. This will protect the privacy of all children at our schools. This is expected of all staff members within our schools and is required of all volunteers as well. Violations of confidentiality will not be tolerated. Continued volunteering is contingent upon respecting this request.

If you have questions related to confidentiality, please do not hesitate to ask a school staff member.

Please complete this form and return it to the District Office along with all other requested volunteer application materials. Thank you.

I have read and understand the confidentiality requirements required for all volunteers in the Fallsburg Central School District:

Name (Printed) _____

Signature: _____

Date: _____