Windham Public Schools



VOLUNTEERS



The Board of Education recognizes that volunteers can make many valuable contributions to our schools. The Board endorses a program encouraging community residents to take an active role in improving schools and to become school volunteers in schools, subject to suitable regulations and safeguards. Appropriate recognition of volunteer services shall be made by the Board and school district administration.

The Board of Education encourages the use of volunteers to: (1) increase students' educational attainment, (2) provide enrichment experiences for students, (3) increase the effective utilization of staff time and skills, (4) give more individual attention to students, and (5) promote greater community involvement.

The Superintendent shall establish procedures for securing and screening resource persons and volunteers. No person who is a "sex offender" as defined by Public Act 98-111, An Act Concerning the Registration of Sexual Offenders shall be used.

Principals shall maintain a list of all regular volunteers in the district (chaperones on field trips, aides, library and classroom volunteer assistance, grandparents, assistance at athletic events, field days, etc.), which shall be available to the Superintendent of Schools.

Legal Reference: Connecticut General Statutes

10-4g Parent and community involvement in schools; model programs; school-based teams.

10-235 Indemnification of teachers, board members, employees and certain volunteers and students in damage suits; expenses of litigation.

54-254 Registration of person who has committed a felony for a sexual purpose.

Policy adopted: May 12, 2010

WINDHAM PUBLIC SCHOOLS Willimantic, Connecticut

WINDHAM PUBLIC SCHOOLS

Willimantic, CT

Volunteer Information and Waiver of Liability

Only one form needs to be completed by a v	olunteer each	school year. I	Please pri	nt clearly in ink.	
Name of school:					
Teacher you will be working with:					
Personal Information:	Phone:				
Last Name F	irst Name			Middle Name	
Address (No P.O. Box)					
Street	City			Zip Code	
Personal Physician:					
Emergency Adult Contact:					
Name				Phone Number	
Are you now or have you ever been a school volunt	teer?		Yes	No	
At which school?			Year?		
The name of any child or ward attending this schoo	l:				
Criminal Conviction Information					
Are you a sex offender: Yes		No			
Have you ever been convicted of a felony? If you answered YES, list all offenses Offense(s)		Yes [No	
Date(s)					
Place(s)					

If requested are you willing to consent to a criminal background investigation? _____Yes _____No Waiver of Liability

Windham Public Schools does not provide liability insurance coverage to non-district personnel serving as volunteers for the School District. The purpose of this waiver is to provide notice to prospective volunteers that they do not have insurance coverage by the School District and to document the volunteer's acknowledgment that they are providing volunteer service at their own risk. However. C.G.S. 10-235 provides that the district must indemnify and hold harmless volunteers from civil liability in most situations as long as the volunteer is approved by the Board of Education to carry out a duty prescribed by the Board and performs services under the direction of a certified teacher. Therefore the district must pay any damages awarded to a plaintiff in an action brought alleging negligence or other act resulting in injury, including infringement of that person's civil rights.

By your signature below:

- 1 You acknowledge that Windham Public Schools does not provide insurance coverage for the volunteer for any loss, injuries, or death resulting from the volunteer's unpaid service to the School District.
- 2 You agree to assume all risk for death or any loss, injury, illness or damage of any nature or kind, arising out of the volunteer's supervised or unsupervised service to Windham Public Schools. You agree to waive any and all claims against Windham Public Schools or its officers, Board members, employees, agents or assigns for loss due to death, injury, illness or damage of any kind arising out of the volunteer's supervised or unsupervised service to Windham Public Schools.

Signature of Volunteer

Date

Printed name of Volunteer: ____

For School Use Only:

supervising students as needed by teacher	
supervising students during a regularly scheduled activity	
assisting with academic programs	
assisting at the resource center or main office	
other	

Name of supervising staff member: _____

To be answered by the Principal:

Is a criminal background check a necessity (the individual will be working over a long period of time in direct contact with students where no staff member is continuously present or in other situations where a check would be prudent)?

If yes, volunteer must present fingerprint card and payment for background check to HR Office.

Yes

For Human Resources:

Sex offender list checked by

No