

**BOARD PROCEDURE**

**Descriptive Code: IFCD**

**SCHOOL VOLUNTEERS**

**Date: March 3, 2003**

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Volunteers may contact an individual school to offer services to assist in the educational process. Volunteers should provide basic information to assist the school(s) in determining suitable activities with which the volunteer feels comfortable. The school administrators will complete the **VOLUNTEER/MENTOR INFORMATION SHEET (Attachment 1)** and keep on file at the school.

The principal is responsible for establishing the parameters of the volunteer services and for conducting the necessary orientation for the volunteer position(s). The orientation should address confidentiality issues as well as other basic information which is critical to safeguard the educational process.

**Written permission (Attachment 2) is required for any student to be removed from class for individual tutoring or mentoring.**

**ADOPTED: 07/10/90**

**REVISED: 8/7/00**

**Columbia County Board of Education**

# Columbia County Schools Volunteer/Mentor Information Sheet

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ Birth Date (month & day only): \_\_\_\_\_

Home Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

If you have a child/ren attending Columbia County School, please provide the following information:

Child's Name _____	School _____
Child's Name _____	School _____
Child's Name _____	School _____

References: Please list two persons whom you have known for at least one year, DO NOT LIST relatives. (Note: This procedure is followed to help provide the safest environment for our students.)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been arrested or convicted of a misdemeanor or felony other than a simple traffic violation or have an arrest pending court disposition? Yes \_\_\_\_ No \_\_\_\_ If yes, please explain on an attached sheet of paper.

I AM WILLING TO ACCEPT ORIENTATION, TRAINING, AND GENERAL DIRECTION FROM TEACHERS, PRINCIPALS, AND OTHERS DIRECTING THE VOLUNTEER/MENTOR PROGRAM, AND UNDERSTAND THAT I AM VOLUNTEERING MY TIME FOR THIS TRAINING AND SERVICE. AS A VOLUNTEER, I AGREE TO ABIDE BY THE RULES OF THE SCHOOL AND SYSTEM OF COLUMBIA COUNTY, GEORGIA.

Signature of Volunteer/Mentor \_\_\_\_\_ Date \_\_\_\_\_

Attachment 2

## Columbia County Guidelines for the Use of School Volunteers

1. School volunteers are defined as those people who assist the school on a scheduled basis and are assigned duties within the school such as working as a tutor, mentor, media center/computer lab assistant, or office assistant.
2. Written parent permission is required for any student to be removed from class for individual tutoring or mentoring.
3. Contact with students outside of the school day is discouraged.
4. Only school/teacher approved materials should be used by the mentor/tutor.
5. For the protection of students and volunteers, mentoring and tutoring should be done in public areas within the school. Each school will designate appropriate areas.
6. Volunteers are excluded from the background check required by law of all system employees. However, registered sex offenders will automatically be excluded from any school volunteer opportunities.
7. All school volunteers will have an information sheet on file. This does not include occasional visits to the classroom as a guest, chaperones for events, or extra-curricular volunteer opportunities.
8. The administrator of the school reserves the right to decline the services of a volunteer if the use of that volunteer does not support the best interest of the school.
9. Each school's administration will provide training for all school volunteers which will include as a minimum:
  - Confidentiality policies
  - Notifying school personnel if students reveal sensitive information that could result in concerns about the child's safety
  - Procedures for signing in daily, wearing identification badges, dress code, and reporting absences
  - Complete information sheet signed by each volunteer
  - Training in tutoring/mentoring strategies provided by school personnel

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I agree for my child \_\_\_\_\_ to work with a tutor/mentor according to the above guidelines established by the Columbia County School System.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_