



# Chimacum School District

PO Box 278~Chimacum WA 98325  
(360)385-3922

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## Volunteer Application Instructions

Thank you for your willingness to volunteer with Chimacum School District. To ensure the safety of our students and staff, there is an application packet you must complete before you can begin your volunteer assignment.

### 1. Volunteer Application Form

This form provides basic information about you and your volunteer interests.

All applicants must fill out section 1 of the Volunteer Application form. Section 2 is only for volunteers who may wish to serve on a regular basis.

- Read the Volunteer Handbook thoroughly.
- Sign and date at the bottom of the page to indicate that all the information on your form is accurate and that you have read, understood, and agreed to the guidelines included in the handbook.

### 2. Washington State Patrol (WSP) Background Check Form

All volunteer applicants must receive a background check through Washington State Patrol.

- Please complete sections C and D. Fingerprints are not required. Sign and date the form to indicate that the information you provided is accurate.

### 3. Disclosure Form

This form provides information about any past or current criminal or civil offenses. It also gives permission for the district to conduct the background check.

- Please answer each question completely and truthfully. Add an extra sheet of paper if necessary.
- Sign and date the form to indicate that the information you provided is accurate.

### 4. Review District Forms and Protocols, Sign Form and Return with Packet

Review the following District policies: Protocol For All Personnel in Dealing with Inappropriate Behavior by Adults with Students, SBP 6590: Sexual Harassment and SBP 3421: Child Abuse, Neglect and Exploitation Prevention.

### 5. Provide a Copy of Driver's License

Attach a copy of your current driver's license, or other photo identification that includes your legal name and date of birth. This helps to verify identity during the background check.

### 6. Complete the Sexual Harassment Online Training Course

This online course can be completed at school or at home and takes approximately 20-30 minutes. We will contact you with your log-in information once all application materials are received.

### VOLUNTEER EXPECTATIONS:

- Wear professional attire; Share concerns with school staff only; show respect for all staff and students; not use school equipment for personal purposes; not share personal religious or political beliefs
  - No smoking allowed; No weapons allowed; No drugs allowed; Wear ID badge on school grounds
  - **Important:** All student information must be kept confidential per federal law. Disclosing any information about a student including academic, medical and personal information is a violation of the Family Educational Rights and Privacy Act of 1974 (FERPA).
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The Chimacum School District #49, a smoke free/drug free workplace, complies with all state and federal rules and regulations and does not discriminate on the basis of race, creed, color, national origin, sex, marital status, sexual orientation or non-program-related physical, sensory or mental disabilities. This holds true for all district employment and opportunities. Inquiries regarding compliance and/or grievance procedures may be directed to the school district's Title IX/RCW 28A.640 Officer and/or Section 504 Coordinator.

#### **Title IX/RCW 28A.640 Officer:**

Mike Raymond  
PO Box 220  
Chimacum WA 98325-0278  
(360)385-3922 ext. 237

#### **Section 504 Coordinator:**

LaVonne Grimes  
PO Box 10  
Chimacum WA 98325-0010  
(360)385-3922 ext. 254



# CHIMACUM SCHOOL DISTRICT

## Volunteer Application

### 1. Background Information

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Check one:  parent/guardian  non-parent/community member  student

Full legal name \_\_\_\_\_  
first middle last

M \_\_\_\_ F \_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace (city/state or country) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_ ZIP \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Name of child(ren)/student(s) \_\_\_\_\_

School where you wish to volunteer \_\_\_\_\_

Reason for volunteering (include specific details) \_\_\_\_\_

Employer \_\_\_\_\_ Phone # \_\_\_\_\_

Emergency contact (local) \_\_\_\_\_ Phone # \_\_\_\_\_

### 2. Volunteer Interests & Availability (for regular volunteers)

School(s) preference \_\_\_\_\_ Grade level preference \_\_\_\_\_

Volunteer interests \_\_\_\_\_

Languages spoken \_\_\_\_\_

Best day(s) of week \_\_\_\_\_ Hours available \_\_\_\_\_

All information in this application is accurate to the best of my knowledge. I have received and thoroughly read the Chimacum School District Volunteer Handbook. I understand the information in the handbook and I agree to comply with the guidelines. As a condition of being permitted to volunteer for Chimacum School District, I freely accept and voluntarily assume the risks of personal injury or property damage that may result from my volunteer experience, including but not limited to, any activity while volunteering on school property. I hereby agree to waive any and all claims arising out of any such injury or damage.

**Applicant signature** (or parent/guardian if under 18) \_\_\_\_\_

**Date** \_\_\_\_\_

**Please Attach a Copy of Your Driver's License**

Please return all completed forms to the school in which you would like to volunteer, or to the district's Volunteer Office at Chimacum School District: P.O. Box 278~91 West Valley Rd~Chimacum, WA 98325.



# CHIMACUM SCHOOL DISTRICT

TO: Substitutes and Volunteers in the Chimacum School District

FROM: Stephanie McCleary, HR Department

**The Chimacum School District is required to:**

- Review and update board policies every two years to remain compliant with current state and federal laws.
- Ensure that all staff including substitutes and volunteers receive a copy of the board policies every two years.
- Ensure the employee signs receipt of policies and protocols and returns to Human Resources to be kept on file.

Please review the attached documents, sign below that you have reviewed the documents and return it to: **Chimacum School District**, PO Box 278~91 West Valley Rd, Chimacum WA 98325, Attn: Stephanie McCleary

Chimacum School District **does not** encourage or sanction volunteer/student contact outside the structure of the school day, building, or school-related activities. This means:

- Do not provide your phone number to any students and do not ask for the phone number of any student.
- Do not provide your address to any student and do not ask for the address of any student.
- Do not offer or agree to transport any student at any time.
- Do not engage in private tutoring sessions outside of the school building or days and hours of operation.
- Do not give any gifts to students or receive gifts from students.
- If working one-to-one with a student, always do so in a public area, i.e. a hallway, classroom or library.

If you suspect that a child may be the victim of abuse, report it immediately to the principal, school counselor or another school district employee.

I have received and reviewed the following Chimacum School District policies: Protocol For All Personnel in Dealing with Inappropriate Behavior by Adults with Students, SBP 6590: Sexual Harassment and SBP 3421: Child Abuse, Neglect and Exploitation Prevention.

I will adhere to these guidelines and acknowledge my role in protecting children from sexual abuse and inappropriate conduct by adults.

Printed Name:	Date
Signed:	

If you have any questions, please contact me. Thank you for your help in expediting this legal requirement. For additional information, forms, legal citations, etc., a link on our webpage has been created titled: **Inappropriate Conduct**.