

Five Town CSD/Camden Rockport Schools
22 Knowlton Street
Camden, ME 04843
(207)236-3358 (p) • (207)236-7810 (f)
www.fivetowns.net

VOLUNTEER APPLICATION FORM AND CONFIDENTIALITY AGREEMENT

Dear Prospective Volunteer,

Welcome to the Five Town CSD and Camden Rockport School District where we appreciate and welcome parent and community involvement in the education of our students. Each school manages placement of volunteers, and the applications are processed first with the school and then through the district central office. Individuals interested in volunteering need only fill out one application, regardless of the number of students in the family, or which of the three schools they attend.

Prospective volunteers must complete and sign the Volunteer Application form and Confidentiality Agreement. Criminal Background checks will be performed on all volunteer applicants. Any information obtained through this form and background checks will remain strictly confidential.

The Superintendent approves all volunteer applications before volunteers begin any assignment. The supervising staff member is responsible for giving volunteers a clear understanding of the duties, procedures, and expectations necessary to perform their assignments.

Because we are responsible for student safety and need to take a conservative approach, our district will deny volunteer applications for the following reasons:

- 1. Any conviction within the past 2 years other than minor traffic violation.
- 2. Any conviction that involves a minor within the past 10 years.
- 3. Two or more convictions within the past 10 years.
- 4. Any assault or sexual misconduct against a minor.
- 5. Administrator discretion.

Any applicant who is denied may appeal the denial through a meeting with the Superintendent. If a unique situation exists, approval may be reconsidered.

Important Details:

- Each spring we will send out an email to all CRES and CRMS families with instructions on how to volunteer for the coming school year.
- Individuals who wish to renew their volunteer status are required to complete a new Volunteer Application.
- We run background checks on all volunteer applicants.
- If you have been approved to volunteer in our schools during any given year and are convicted with a crime that
 - same year, it is your responsibility to inform the school district immediately.

Sincerely,

NEPN/NSBA Code IJOC-R

| Program Coordinator use only: Program: | Fingerprinting Required: Yes | No | Initials: |
|--|------------------------------|----|-----------|
| | | | |

FIVE TOWN CSD/CAMDEN ROCKPORT SCHOOLS VOLUNTEER APPLICATION FORM AND CONFIDENTIALITY AGREEMENT

| SCHOOL YEAR: (e.g. 2022-20 | 023) | | | | | |
|---|-----------------------|-----------------|--|-------------------|----------------|--------------------|
| SCHOOL INFORMATION: Sc | nool | CRES | CRMS | CHRHS | Adult Ed | |
| Specific Program: | | | Field Trips | Class | sroom | Other |
| APPLICANT PERSONAL INFO | RMATION | | | Today's Date | 2: | |
| First Name: | Mido | dle: | Last Name: | | | |
| Maiden Name: | Previous Last Name(s) | | | | | |
| Address: | | | | | | |
| Home Phone: | | | | | | |
| Email: | | | | | | |
| Children in Five Town CSD/C | amden-Rockport | Schools: | Grade: | Name: | | |
| | | | | | | |
| | | | | | | |
| | | | cense or other ID co ou if you don't have a | _ | _ | <mark>birth</mark> |
| | | | | | | من مامط امانمین |
| in meeting the needs of our | | t any education | on, training, or expe | eriences you na | ve nad wnich | would nelp us |
| | | | | | | |
| BACKGROUND: The followi of our students. A YES answ | - | | | | en to help er | sure the safety |
| 1. Have you had any crim | inal conviction(s) | within the na | st 2 vears other tha | n a minor traffi | c violation? | Yes No |
| , | | · | · | | | Vad Va |
| 2. Have you had any crim | | · | · | oive(s) a minor : | | 7es/No |
| 3. Have you had two or n | nore criminal conv | victions within | the past 10 years? | | | YesNd |
| 4. Have you EVER had an | y assault or sexua | l misconduct (| convictions against | a minor? | | Yes No |
| If you have answered YES to if necessary. | any of the above | questions (1 | – 4), provide full de | tails below. Use | e additional s | heets |
| | | | | | | |
| If you have lived outside of I | Maine, please spe | cify states and | d dates: | | | |

Refusal to provide authorization for criminal background checks and/or providing false or misleading information on this application shall constitute sufficient reason to deny approval to serve as a volunteer or termination as a volunteer in the Five Town CSD/Camden Rockport Schools.

I understand that the Five Town CSD/ Camden Rockport School District perform criminal background checks on all volunteers, and I authorize persons and entities contacted by the School Districts in connection with this application to provide information about me. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school districts, its agents and officials or against any provider of such information. I further understand that as a volunteer applicant, I am required to sign the *Volunteer Confidentiality Agreement* below. I am aware that I will receive no compensation for my services.

| I have been truthful in all information and re | esponses to questions on th | is application. |
|---|--|---|
| Signature of Volunteer | | Date |
| All application materials become the p | property of Five Town CSD/C | amden Rockport Schools. None will be returned. |
| | VOLUNTEER CONFIDENTIA | LITY AGREEMENT |
| that even when I am no longer a volunteer kept confidential. I understand that any bre result in my immediate termination as a vol I understand that I must comply with all Boafrom school administrators and staff while s | in the schools, any confider each of these confidentiality unteer and may result in legard policies and school rules serving as a volunteer. I fur ion of the Superintendent a | gal action against me. s applicable to school staff, as well as all directions ther understand that my authorization to serve as a nd school principal at any time if they determine it is |
| Signature of Volunteer | Printed Name | Date |
| This Volunteer will not be CO OFFICE USE ONLY: Central Office Administrator:Application ApprovedApplication Denied | select one with your initial one with students. Fingerprine alone with students. Finger | nt approval <u>IS</u> required. rprint approval <u>IS NOT</u> required. |
| CO Administrator or Authorized Off | ficial: | Date [.] |

History:

Adopted: 9/30/16

Reviewed: April 6, 2022