

VOLUNTEER FORM AGREEMENT

Thank you for offering to serve as a volunteer for Utica Community Schools. Volunteers truly make a difference in the lives of our students, UCS values your service! The following Agreement serves to establish an understanding of the role of a volunteer and to understand guidelines related to volunteering. This agreement also serves as a safety net for you, the volunteer.



**UTICA
COMMUNITY
SCHOOLS**

As a volunteer for UCS, I understand and agree to the following:

**PLEASE RETURN COMPLETED
VOLUNTEER FORM TO YOUR
CHILD'S SCHOOL**

- Volunteer service must be pre-approved by appropriate school District personnel.
- As a volunteer, I agree to work under the supervision and direction of a District staff member while at a school site and/or during school sponsored travel/field trips and off-site activities.
- I will abide by all school rules and Utica Community Schools Board of Education policies and procedures.
- I will refer any student in need of first aid and/or medication to the teacher or front office.
- I will refer any potential student discipline to the appropriate District staff member.
- I will maintain confidentiality of all student information. Performing volunteer service may require access and use of personally identifiable information (PII) from students' education records. Access and use of the PII is governed by the **Family Educational Rights and Privacy Act (FERPA)**.
 - FERPA is a federal law that protects personally identifiable information (PII) in students' education records from unauthorized disclosure.
 - FERPA requires the school or District to maintain "direct control" over your use and maintenance of students' education records and to use reasonable methods to ensure that you obtain access to only those education records in which you have an educational interest.
 - It's important that you take the following steps to protect student privacy:
 - *Do not disclose the PII to another party* (except back to the school or District). The PII must not be shared with unauthorized users, and it must be protected from inadvertent disclosure due to careless handling.
 - *Do not use the PII for other purposes*. The PII has been provided only for you to perform the volunteer service for which the school provided you the information. It should not be used for other purposes.
 - *Do not keep the PII after you complete your volunteer service*. Destroy or return the PII to the school or District after completion of the service that you provided.
- I will not take, record or publish photographs, videos or audio recordings, other than of my own child only, without permission from District personnel.
- I understand technology resources are to be used only for educational purposes.
- I will wear a visible visitor badge, sign in and out at the office.
- I will Inform the principal/administrator of any issue that may impact my service as a volunteer.
- I will immediately report any injury I sustained during my volunteer work. I understand that as a volunteer I am NOT covered under Utica Community Schools workers' compensation insurance and if injured while volunteering will be responsible for the costs associated with any such injury.
- I will complete and submit to my child's school the I-Chat (criminal history check) form, found on page two.

I understand and agree that my failure to maintain the confidentiality of all school and student information (including my observations related to academic performance and/or student behavior), along with any education records that I have been given access, may disqualify me from further service as a community volunteer in the District. In addition, my failure to comply with any of the above-stated agreements may also disqualify me from further service.

Volunteer Signature: _____ **Date:** _____

School: _____ **School Year:** _____

Volunteer (first and last name): _____

Current Student(s) I am Associated with in UCS: _____

SCHOOL OFFICE SECTION TO COMPLETE:

Current background check on file? Yes No **Restrictions?** Yes No

VOLUNTEER FORM

I-CHAT (CRIMINAL HISTORY CHECK)

As a prospective volunteer of the Utica Community Schools, I understand that it is the school district's policy to secure Conviction Criminal History information as part of their screening process using the information provided below:



**UTICA
COMMUNITY
SCHOOLS**

2024-2025 SCHOOL YEAR

PLEASE PRINT CLEARLY

All requested information must be completed.

PLEASE RETURN COMPLETED
VOLUNTEER FORMS TO YOUR
CHILD'S SCHOOL

VOLUNTEER: CHECK IF NEW FOR
PRIORITY PROCESSING

Name: _____
LAST (as shown on your license) FIRST (as shown on your license) MIDDLE INITIAL

Maiden Name/Names Previously Used: _____

Daytime Phone: _____ Other Phone: _____

Birthdate: _____ / _____ / _____ Race: _____ Gender: _____
(month) (day) (year)

MICHIGAN Driver's License/State ID No.: _____

School Name(s): _____

Student(s) Name: _____ Student(s) Grade: _____

Volunteer for: _____

(List teacher, activity, specific fieldtrip and **date attending**.)
Please submit two (2) weeks prior to activity.

Please be advised that if you have been convicted of a FELONY, volunteer activity will be restricted.

Have you ever been convicted of a felony? Yes No

Are there any felony charges currently pending against you? Yes No

If yes, please explain the nature of the conviction and date of the conviction:

I understand that the above information is required by the Central Record Division of the Michigan State Police in Lansing, Michigan. I authorize Utica Community Schools to utilize the above information for the sole purpose of obtaining a conviction only criminal history file search.

Signature: _____ Date: _____