



## VOLUNTEER AGREEMENT

Print Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
*(Last Name, First Name, Middle Initial)*

Maiden Name (if applicable): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Please check one or more schools you are willing to volunteer at:

- Cormier School & Early Learning Center       Valley View Elementary School       Pioneer Elementary School  
 Parkview Middle School       Ashwaubenon High School

I, \_\_\_\_\_, understand and agree that my involvement as a volunteer with the Ashwaubenon School District is performed with and under the following provisions:

1. My services as a volunteer are at the request, knowledge and control of the Ashwaubenon School District through its administrators or teaching staff.
2. I will not be paid any salary or stipend for my services.
3. I will not be eligible for or request any benefits for my services.
4. I will be covered by Ashwaubenon School District liability insurance.
5. If any part of my volunteer activities involve me transporting students by car, I must receive written authorization from an administrator or school district employee prior to providing such a service and must complete the appropriate school district form relating to the use of a car, its condition and minimum required insurance coverage.
6. I will familiarize myself with and adhere to all policies and procedures established by the Ashwaubenon Board of Education and administrative staff.
7. I am aware that the School District will do both a criminal and/or noncriminal background check.
8. Information that I may learn about other children or their families in my role as a volunteer must be kept confidential. If I have concerns about anything that occurs during the time I am serving as a volunteer, I will bring them to the attention of the classroom teacher or the person supervising the activity.

I understand any false statements or misrepresentation of facts are grounds for dismissal. I hereby certify that the statements above are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For District Office Use Only:**

Date background check complete: \_\_\_\_\_ Background check completed by: \_\_\_\_\_