

Lake Chelan School District 129

VOLUNTEER HANDBOOK



Morgen Owing Elementary & Preschool
Chelan Middle School ~ Chelan High School
Chelan School of Innovation
Holden Village School

2022/2023

(Updated July 2022)

On behalf of Lake Chelan School District, we welcome you and are delighted that you have offered your time and services. Your services are essential in helping our schools and students meet our mission, vision, and goals. We appreciate your interest in contributing your time and talent to the education of our students.

Our volunteers are an important part of our school community and we appreciate your interest in getting involved in your local school. Volunteering is designed to promote and maintain a supportive relationship for the students, teachers, coaches, and community members. As a staff, it is our goal to make sure that your time with us, is enjoyable, insightful, but most of all, rewarding.

As with most things in life, there is a bit of paperwork to get started. Please note the information following is as much for your safety as it is for the safety of your students. Please complete the forms in this packet and return them to the school building office.

Background forms take at least 2 weeks to be processed and returned to school. If you have any questions or need assistance, we are happy to assist.

Thank you for your services!



Volunteer Expectations & Guidelines -- Keep for your records

These pages outline the expectations and guidelines that volunteers must follow to create safe and successful experiences for students, staff and volunteers. All volunteering relationships established through Lake Chelan School District must take place with students on the school campus during school hours or at other authorized school activities only.

You Are Part of an Educational Team

Volunteers who are committed to helping students be successful are important members of the school team. These individuals are essential to bringing the outside world into the school. Students need contact with individuals who can share experiences and bring other perspectives into the classroom or activity. They need adults who can guide them through the learning process.

Goals:

- Enrich the curriculum
- Enrich student's learning opportunities
- Provide help for individual students
- Provide opportunities for meaningful service
- Relieve teachers of some non-instructional tasks
- Relieve coaches during practice times
- Enhance all aspects of the educational process

Working closely with the classroom teacher and school staff includes:

- Following the direction of a school staff member or coach
- Accepting direction suggestions from teachers and coaches
- Respecting the privacy of teachers, coaches, and students by not discussing school matters away from the classroom
- Understanding that evaluation of student's learning can only be done by the teacher
- Seeking help from the teacher when you need additional information or instruction
- Committing to working in a classroom, field, or gym to support and improve education for all students
- Sharing ideas and constructive comments with the teacher or coach
- Acknowledging that teachers and coaches are responsible for discipline in the classroom or on the field/gym

Enjoy working with students by:

- Finding ways to establish a good rapport with students
- Providing help and assistance without doing the work for students
- Showing a genuine interest in each student
- Accepting each student and encouraging the best from him or her
- Using patience and kindness

Sometimes a volunteer placement may not be a fit for the volunteer, the teacher, the coach, or the school. If your volunteer placement does not work for you, the teacher, coach, or the school for whatever reason, your volunteer assignment may be ended, modified, or changed to a new assignment. You may request a different placement if you wish to continue volunteering.

Volunteers are expected to:

- Sign in and wear an ID badge on school grounds at all time.
- Wear appropriate attire in accordance with school policy.
- Show respect for all staff and students.
- Share concerns regarding students with the school staff only.
- Obtain TB test, and complete online training on child abuse and neglect. **(For preschool volunteers who volunteer weekly or on a more frequent basis)**

If you cannot make your scheduled volunteer time, please call the school so the teacher and students will know you will not be there. Please do not bring younger children to the school during your volunteer hours. You will also be asked to turn off your cell phone ringer while you are volunteering in the classroom and are discouraged from making personal calls (unless there is an emergency) while working in the classroom.

Ground Rules for District Facilities

- No smoking or tobacco allowed, including on athletic fields and in district vehicles.
- No weapons allowed
- No drugs or alcohol allowed
- Do not use school equipment for personal purposes

Maintain Student Confidentiality

Volunteers are expected and required to keep all ‘student information’ that they obtain while working as a volunteer for Lake Chelan School District confidential. In fact, Federal Law strictly prohibits school districts and district volunteers from releasing any student information without parent/guardian permission. Student information includes all academic, medical, and personal information. Disclosure of student information by a volunteer is a violation of the Family Educational Rights and Privacy Act of 1974 (FERPA) and may subject the volunteer and the district to civil liability. It is very important that you keep information about students confidential. It is important that you do not discuss students or their progress with others – even their parents. Do not make references to student’s abilities in front of other students. The only person who should be told about a student’s work is their teacher. If parents ask about their students’ progress, suggest in a friendly way that they contact the teacher.

District Obligations

The Lake Chelan School District is an equal opportunity employer and is in compliance with State and Federal anti-discrimination regulation and other requirements. We care about the dignity of all individuals and assume the responsibility for providing an environment that is free from all types of discrimination and harassment.

The Lake Chelan School District Harassment Policies call for a commitment to an educational environment that is free from all types of discrimination and harassment, including sexual harassment, bullying and intimidation. Sexual harassment is defined as verbal, visual, or physical advances at work (or in a volunteer setting) and unwelcome by the person for whom they are intended. An informal and formal complaint process exists for employees and volunteers and can be outlined by the district office. Volunteers are expected and required to respect and uphold the Lake Chelan District Policies 3207, 5011, 6590.

Safe Interaction with Students

The school expects that the entire staff (including volunteers) shall strive to set the kind of example for students that will serve them well in their own conduct and behavior and contribute toward a school atmosphere that is friendly but has a degree of professionalism.

Safety Practices to Follow:

- Remember to wash hands carefully, thoroughly and often.
- Refrain from coming in contact with another person's body fluids. Contact a teacher, custodian and have the students clean and treat their own conditions involving blood, feces, urine, vomit, saliva, and mucus if possible.
- Always consult the school staff and report any exposure to body fluids. (Board Policy 6512)

Industrial Insurance Benefits

As a volunteer recording hours, you are covered under the district's Self Insured Industrial insurance Benefits plan. If you are hurt while volunteering, please report the accident to the building secretary to complete an accident report.

Note: The Volunteer Application will be retained by the school secretary and made available to coaches and teachers on a need to know basis. The school principals and athletic/activities directors will determine the eligibility of volunteers in the schools contingent upon a satisfactory background check annually.

The Washington State Patrol Request for Criminal history form will be sent to the Human Resources Office. Human Resources will process the form with the Washington State Patrol for clearance and approval.

Lake Chelan School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained guide dog or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employee(s) has been designated to handle questions and complaints of alleged discrimination:

Title IX / Civil Rights Compliance Coordinator: Human Resources, 509-682-3515 or rossj@chelanschools.org

Section 504 / Special Education / ADA Coordinator: 509- 682-7744 or marshlalink@chelanschools.org

Lake Chelan School District, PO Box 369, Chelan, WA 98816

El Distrito Escolar de Lake Chelan no discrimina en sus programas o actividades por motivos de sexo, raza, credo, religión, color, origen nacional, edad, condición de veterano de guerra o grado militar, orientación sexual, expresión de género o identidad, discapacidad o uso de perro guía entrenado o animal de servicio, y ofrece igualdad de acceso a los Boy Scouts y a otros grupos de jóvenes especificados. El empleado mencionado a continuación ha sido designado para atender consultas y quejas de supuesta discriminación:

Titulo IX / Coordinador de Cumplimiento de los Derechos Civiles: Recursos Humanos, 509-682-3515 or rossj@chelanschools.org

Sección 504 / Coordinador de educación especial / ADA, 509- 682-7744 or marshlalink@chelanschools.org
Lake Chelan School District, PO Box 369, Chelan, WA 98816

Lake Chelan School District Volunteer Applicant Information



First Name

Middle Initial

Last Name

Mailing Address

City

State & Zip

Email

Phone Number

Emergency Contact: _____ Phone Number: _____

I am a: Parent/Guardian Relative Community Member

Languages spoken besides English:

Please indicate the grade level/s that you wish to volunteer in:

All grade levels: _____ Preschool _____ Elementary: K_____ 1_____ 2_____ 3_____ 4_____ 5_____
Middle School: 6_____ 7_____ 8_____ High School: 9_____ 10_____ 11_____ 12_____

I would like to volunteer in the following way(s):

Classroom Support Athletic Support Program Support Field trips

Other:

I would like to volunteer: Daily Weekly Monthly When needed

Days available: Monday Tuesday Wednesday Thursday Friday

Times that are best for me: Anytime AM PM

(Initials) I have read and understand the Volunteer Expectations and Guidelines.

Lake Chelan School District Volunteer Statement Affirming Understanding

I understand that information regarding students, families, staff, and the organization may be confidential in nature and that as a volunteer for Lake Chelan School District I will....

- respect the confidential nature of any verbal or written communication I receive regarding students, families, staff, and the organization and keep personal information confidential at school and after I leave school.
- be discreet in any verbal communication by not discussing students, staff, or families in front of others at school and after I leave school.
- immediately report directly to the principal any information disclosed to me concerning a child's safety.
- make reasonable efforts to assure that each student is protected from harassment or discrimination and I will not harass nor discriminate against any students, staff member, or volunteer on the basis of race, creed, religion, color, national or ethnic origin, age, honorably-discharged veteran or military status, sex, sexual orientation including gender expression or identity, marital status, the presence of any sensory, mental, or physical disability, or the use of a trained guide dog or service animal by a person with a disability, political beliefs, or social and family background.

I also understand that relationships developed with children at school should remain at school for the protection of the student, staff, coach, and volunteer. Volunteers should not be left alone with a child out of view of school personnel or another adult volunteer.

Volunteers are also reminded that permission to communicate with a student outside of the regular school day must be granted by the student's parent/guardian; Lake Chelan School District cannot and will not grant this permission.

I understand it is my responsibility to read and understand all materials provided to me. I further understand that by law I am a mandatory reporter and agree to comply with all district, state and federal laws.

If I have questions regarding any of the materials provided, I understand I am to contact the school district office at 509-682-3515 or school buildings: MOE 509-682-4031, CMS 509-682-4073, CHS 509-682-4061, CSI 509-888-8773

Signature: _____

Print name: _____

Date: _____

LAKE CHELAN SCHOOL DISTRICT #129
DISCLOSURE FORM

Answer YES or NO to each listed item. If the answer is YES to any item, explain in the area provided, indicating the charge or finding, the date and the court(s) involved.

1. Have you ever been convicted of any crimes against persons as defined in Section 1 of Chapter 486, Laws of 1987, and listed as follows: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second or third degree assault; first, second or third degree rape; robbery; first degree arson, first degree burglary; first or second degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide, first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment:

ANSWER: _____ IF YES, EXPLAIN BELOW:

2. Have you ever been found in any dependency action under RCW 12.24.030 (2) (b) to have sexually assaulted or exploited any minor or to have physically abused a minor?

ANSWER: _____ IF YES, EXPLAIN BELOW:

3. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?

ANSWER: _____ IF YES, EXPLAIN BELOW:

4. Have you ever been found in any disciplinary board final decision to have sexually abused or exploited any minor to have physically abused any minor?

ANSWER: _____ IF YES, EXPLAIN BELOW:

Pursuant to RCW 9A.72.085, I certify under penalty or perjury under the laws of the state of Washington that the foregoing is true and correct.

Applicant Signature _____

Printed Name _____

Witness _____

Witness Business or Organization _____

Witness Address _____ City _____ State _____ Zip _____

WASHINGTON STATE PATROL

Identification and Criminal History Section
PO Box 42633, Olympia WA 98504-2633



REQUEST FOR CRIMINAL HISTORY INFORMATION CHILD/ADULT ABUSE INFORMATION ACT RCW 43.43.830 THROUGH 43.43.845

A REQUESTING AGENCY/ADDRESS

Lake Chelan School District

Agency

Personnel

Attn

303 E Johnson / PO Box 369

Address

Chelan, WA 98816

City/State/Zip

I certify this request is made pursuant to and for the purpose indicated.

Authorized Signature

Date

Personnel / HR

(509) 682-3515

Title

Area Code/Phone Number

B PURPOSE

Check appropriate box

Educational School District (ESD)/School District Volunteer – no fee

Non-Profit Business/Organization – no fee (Excluding Schools & ESD's)

Profit Business/Organization - \$17

Adoptive Parent - \$17

Receive background results electronically

Email address _____

Password _____ (must be at least 8 characters)

Fees: Make payable to Washington State Patrol by check, money order, or business account.

Notary letters certifying the results are available upon request. There is an additional \$10.00 processing fee per notary seal.

Notarized Letter(s) _____

C APPLICANT OF INQUIRY (Please provide as much information as possible; name and date of birth are mandatory.)

Applicant's Name: _____
Last _____ First _____ Middle _____

Alias/Maiden Name(s): _____

Date of Birth: _____
Month/Day/Year _____ Sex: _____ Race: _____

Secondary dissemination of this criminal history record information response is prohibited unless in compliance with statute.

D WASHINGTON STATE PATROL IDENTIFICATION & CRIMINAL HISTORY SECTION

As of this date, the applicant named below has no record pursuant to RCW 43.43.830 through 43.43.845.

Lake Chelan School District

Requesting Agency

Applicant's Signature

Applicant's Name

Address

City/State/Zip