

Hollidaysburg Area School District Volunteer Disclosure Sheet

In accordance with Policy 916, all volunteers must have a disclosure sheet on file in the Hollidaysburg Area School District Human Resources Department. Please complete the following information and return it to the building administrator in which you are volunteering for his/her signature.

Name: _____

Address: _____

Student Name (if applicable) _____ **Building:** _____ **(adding)**

Description of what you will be doing in the building: _____

Name of employee who you will be working with: _____

PA resident for past ten years: Yes: _____ No: _____

I have been convicted of a crime: Yes: _____ No: _____ **If Yes, explain:** _____

Building Administrator Signature: _____

Date: _____

As a school volunteer you may become aware of information about a student and his/her family, which is confidential. This can include grades, performance, skill levels, and other information shared in the classroom. It is imperative that this information remains strictly in the classroom.

I agree that confidentiality of student information is critical and shall protect such information should I become aware of it.

Volunteer Signature

Date

I have received and reviewed a copy of the Hollidaysburg Area School District Volunteer Policy. I understand the procedures and responsibilities as a volunteer, and I agree to abide by them.

Volunteer Signature

Date