

Form 490-1 v. 2018

VOLUNTEER APPLICATION FORM

Valid only for the current school year

In order to ensure the security and safety of our staff and students, all volunteers in our schools need to be registered. This form must be completed annually. The information collected on this form will be held in strict confidence.

A volunteer:

Supports a classroom, school, or system-wide program. A volunteer is in direct contact with students, and may or may not be under the direct supervision of school staff. Volunteers are under the ultimate responsibility and supervision of the Principal at the school level. A volunteer is an optional support and agrees to undertake a designated task compliant with current legislative requirements.

You must be 18 years or older as a volunteer, WCPS students under 18 do not have to register to volunteer in our schools.

Name of School or Departmen Broncs Athletics	School Year:				
Your Name: (Last Name, First Name)	□ Mr. □ Mrs. □ Ms.				
Mailing Address: (With Postal Code	Date of Birth: (YYYY/MM/DD)				
Daytime Phone:	Evening Phone:	Cell Phone:			
Do you have children or grand	children in this school?	No □ Yes			
If yes, please list by name and	teacher or homeroom:				
Name of Student:	Name of Student: Teacher/Ho				
Do you have a criminal record for which you have not received an official pardon?					
□ No □ Yes					
Have you completed a Vulnerable Sector Check within the previous six months?					
□ No □ Yes					
If yes, please include with this registration form.					
If no, please complete: Form 490-2 - Criminal Record Declaration Form, and					
Form 400.3 Vulnorable Sector Check					

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As a volunteer, WCPS would like to advise of the following conditions:

- 1. Confidentiality is of the utmost importance in the school setting in order to ensure that the dignity and worth of students, parents, volunteers, and school staff is honored.
- 2. Any information collected, used, generated, and stored by the Board of Trustees including student, instructional, financial, or administrative information is strictly confidential and is to be used only in the performance of volunteer duties.
- 3. You may not disclose, communicate, publish, take, alter copy, interfere with, or destroy any information unless you are specifically authorized to do so by the teacher or principal.
- 4. You must notify the Principal of any new criminal charges at the time the charge is made.
- 5. The teaching and administration staff is responsible for student learning and discipline.
- 6. School administration, teaching, and support staff have specific roles to play and it is important that the staff of a school operate as a team.
- 7. You as a volunteer can assist greatly in enhancing student learning by working positively and cooperatively with the school team.
- 8. Any failure to comply with these conditions or Wolf Creek Public Schools <u>Administrative Procedure 490 - Volunteers</u> may result in termination of your position as a volunteer.

By signing this volunteer registration form, I am agreeing to the conditions outlined.				
Date (YYYY/MM/DD)				
The information on this form is collected under <i>Alberta's Freedom of Information and Protection of Privacy Act</i> to carry out our responsibilities under the <i>School Act</i> . If you have any questions about this form please contact your school.				

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CRIMINAL RECORD DECLARATION FORM - VOLUNTEERS

I, _	, declare that:
	I have not been convicted of any offence under the Criminal Code of Canada,
	I have not been convicted of any offence under the Controlled Drugs and Substances Act,
	I have not been convicted of any offence under the Food and Drugs Act,
	Nor have I been the subject of an investigation, order, conviction or other process under the Child, Youth and Family Enhancement Act,
	Nor have I been charged with or convicted of any offence the nature of which is an offence against another person.
or i	y exceptions to the foregoing statements must be fully disclosed. If there are any convictions unresolved charges, please list the specifics of the conviction or offense, date of conviction or ense, court location and sentence if convicted.
	tails of Child, Youth and Family Enhancement Act Proceedings if any:
de in sh	nereby declare the contents of this application, as completed by me, to be accurate. This eclaration has the same effect as if made under oath. Any misrepresentations made by me completing this application may result in termination of my participation as a volunteer ould such misrepresentations come to the attention of the school division at any time after have become a volunteer of the school division.
Da	ate: (YYYY/MM/DD)
Vo	olunteer Signature:
W	itness Signature:

Please submit the completed form to the school where you volunteer and retain a copy for your records.

The personal information on this form is collected, used, and disclosed in accordance with the Education Act, Sections 31 and 225, and the Freedom of Information and Protection of Privacy Act, Section 33, to determine suitability for employment or engagement as a volunteer to work with students. The information collected is kept confidential and used consistent with the purpose provided under the Freedom of Information and Protection of Privacy Act (FOIP). If you have any questions about the collection, use, and disclosure of personal information, please contact the Wolf Creek Public Schools' FOIP Coordinator, 6000 Highway 2A, Ponoka, AB, T4J 1P6, Ph. 403-783-3473.

Distribution: Signed Copy – School Files

Criminal Record Declaration 1 of 1



Form 490-3 v. 2019

VULNERABLE SECTOR CHECK - VOLUNTEERS

The named individual wishes to volunteer with Wolf Creek Public Schools requiring the respective police agency to perform a Vulnerable Sector Check for the following position. Volunteers within Wolf Creek Public Schools require this check because the volunteer will be:

- Working closely with children in situations where he/she will be alone with individual children and groups of children, without direct supervision or oversight from staff; and
- In a natural position of trust and authority given the relationship between children and school volunteers

This position must be specific to the role and so	chool being applied for as per Volunteer Alberta requirements				
Volunteer's Name: (please print)	Date: (YYYY/MM/DD)				
Address:					
The Freedom of Information and Protection of Privacy Act (FOIP), Chapter F-25, charges Wolf Creek Public Schools with protecting the privacy of individuals, most who are under the age of majority. In order to show due diligence in this regard, please conduct a Vulnerable Sector Check on the person named above.					
Below is for School Office Use:					
Request Authorized by School Principal					
Name: (please print)	(Lacombe Use Only) VSPN #: Position Code: Position Title:				
School Name:					

Vulnerable Sector Check 1 of 2

Signature of School Principal:

Volunteer Information:

Please take this form to the local police agency associated with your legal land description/location to have the Vulnerable Sector Check completed.

Bashaw RCMP Detachment	5017 - 52nd Street	(780) 372-3793
Blackfalds RCMP Detachment	4405 South Street	(403) 885-3300
Ponoka RCMP Detachment	5120 - 50 Avenue	(403) 783-4472
Rimbey RCMP Detachment	5117 - 50 Street	(403) 843-2224
Sylvan Lake RCMP Detachment	4260 - 50 Street	(403) 858-7206
Lacombe Police Service	5301 Wolf Creek Drive	(403) 782-3279

- You will be required to produce this form along with two pieces of government issued identification. One must be picture identification.
- Be sure to provide your physical address to prove residency.
- Please note, your driver's license address must match your application address.
- The results of the Vulnerable Sector Check may take between seven to 10 days or longer depending on results.
- A volunteer letter will be required at some detachments from the school the person is volunteering for.

Vulnerable Sector Check 2 of 2