

# JOHNSTON PUBLIC SCHOOLS

10 Memorial Avenue  
Johnston, Rhode Island 02919

## VOLUNTEERS IN SCHOOLS

School Committee Approved – Resolution 07-04-05 April 10, 2007

School Committee Revision – Resolution 07-05-19 May 22, 2007

### **STATEMENT POLICY**

The Johnston Public Schools appreciates volunteer efforts in our schools. Parents, college students, senior citizens, politicians, business representatives, and community members are important sources of support and expertise that enrich the instructional program, assist teachers and connect the student body with the community.

### **DESCRIPTION**

A volunteer shall have the meaning of any person who interacts with and is in the “care, custody and control” of students or serving in an auxiliary capacity assisting under the direction of the Superintendent or designee in a school or during a school sponsored function.

A volunteer is a non-compensated person functioning as a guest for the day.

Volunteers may be requested to assist in special events such as reading day, class activities, and before/after-school programs.

Volunteers shall also include, but not limited to, teacher assistants, parents who observe classrooms, chaperones, college students, student teachers, parent group participants who perform auxiliary functions such as office assistants and outside agencies who interact with students, parent coaches, members of school committee, those associated with after school programs, cafeteria volunteers, members of parent teacher organizations, parents as office assistants-mailings, stuffers, copying and book fairs.

Volunteers must receive permission by the Superintendent or designee (Examples of designee- Principal, Director, Program Coordinator) in advance to volunteer. At the discretion of the Superintendent or designee a request for volunteering may be denied as deemed appropriate.

Volunteers must adhere to all Johnston Public Schools policies and regulations including but not limited to Code of Conduct, Confidentiality, etc.

Volunteers shall not discipline a student.

### **REQUIREMENT**

Volunteers shall be required to complete an Information and Disclosure Statement.

Volunteers may be required to participate in an orientation and/or training established by the Johnston Public Schools.

### **AGE REQUIREMENT**

Volunteers must be a minimum of 18 years of age.

## **ASSIGNMENT**

Volunteers will not be guaranteed they will be in a specific classroom as may be requested.

## **CONFIDENTIALITY**

Volunteers must adhere to the confidentiality of what is observed and not shared outside the classroom.

Volunteers shall not have access to confidential information/file/records.

## **SAFETY AND SECURITY**

Upon initial application, all volunteers shall be required to obtain a local (Rhode Island) BCI and a National fingerprint BCI.

Each subsequent year Rhode Island residents who volunteer shall only be required to obtain a local (Rhode Island) BCI that will remain current commencing from the time that person applies for volunteering until the first day of the next school as determined by the school calendar.

**Applicant may obtain a local BCI from Police Department of the City/Town in which he/she resides.**

The cost of the local background check, if any, is to be the responsibility of the applicant.

**Volunteers who reside outside the State of Rhode Island shall be required to obtain an annual National fingerprint BCI from the Attorney General's office.**

The cost of the National fingerprint BCI background check is to be the responsibility of the applicant.

Volunteers shall not escort or be with children without a classroom teacher present.

Volunteers must provide identification and sign in/out at the school's main office.

Volunteers shall wear the "Visitors" badge or other means of identification as may be required

## **HEALTH**

Volunteers **may** be required to provide verification that they have and passed a Mantoux (TB) skin test. This judgment shall be made by the Health Services Coordinator of the School Department based upon the rate of incidence in the community.

## **VOLUNTEER LIABILITY AND INDEMNIFICATION**

The Johnston Public Schools shall not be held liable for any volunteer for claims or demands whether groundless or otherwise, arising out of an alleged act or omission occurring within the scope of the act of volunteer service.

## **EXCLUSION**

This Policy may not apply to guest speakers, performers, student mentors who are enrolled in the Johnston Public Schools, college student observers, truancy court personnel, newspaper reporters, vendors for school related items such as rings, yearbooks, delivery vendors, and alike.

## **RECORDS RETENTION**

The building level Principal shall maintain an accurate file of signed Volunteer Disclosure Statements, criminal background checks and verifications of health information as required by Policy.



**CRIMINAL IDENTIFICATION RECORDS POLICY**  
**Policy Number 4112.1A (Adopted December 14, 1992)**

Any and all persons hereinafter seeking VOLUNTEERING with the Johnston Public Schools shall include with his/her application, a NCIC criminal identification report with the Division of Criminal Identification, Department of Attorney General, State of Rhode Island, or in the alternate, a duly executed Waiver authorizing the Johnston Public Schools to obtain such a report on his/her behalf.

1. Any applicant who refuses to comply with this Policy shall be ineligible for VOLUNTEERING by the Johnston Public Schools.
2. Any information so obtained shall not be given to any other person, firm or corporation without first obtaining the applicant's written consent; provided, however, that such consent may be withdrawn at any time, in writing, by the applicant.
3. Any information so obtained shall be marked "CONFIDENTIAL" and may not be used for any purpose other than the application for VOLUNTEERING or any manner in connection with the denial thereof.
4. No applicant possessing a criminal record which bears directly or indirectly upon performance of the VOLUNTEERING duties shall be allowed to volunteer, at the sole and absolute discretion of the School Department, whose determination shall be final and binding.
5. A copy of this Policy shall be shown to each applicant at the time application for VOLUNTEERING made.
6. The Waiver Authorization required by this Policy shall be in the form annexed hereto, or as amended from time to time.

**CRIMINAL IDENTIFICATION WAIVER AUTHORIZATION**

I AM INTERESTED IN VOLUNTEERING IN THE JOHNSTON PUBLIC SCHOOLS.

This Waiver Authorization expressly authorizes the Division of Criminal Identification, Department of Attorney General, State of Rhode Island, to furnish the Johnston Public Schools, any and all criminal information it may have concerning me. The release of the requested information is necessary for the purpose of VOLUNTEERING. The authorized information is not to be given to any other person, firm or corporation not specified herein without first obtaining the undersigned's additional written consent. The undersigned may withdraw this consent at any future time, in writing.

_____		_____	
Print full name		Maiden Name?	
_____			
Signature			
_____			
Address _____	City/Town _____	State _____	Zip Code _____
Date of Birth _____	Place of Birth _____		
Social Security Number _____			
Witness _____		Date _____	

THE INFORMATION OF THE BACKGROUND CHECK IS TO BE FORWARDED TO THE

SCHOOL LISTED: \_\_\_\_\_

School Name	Address
Johnston, Rhode Island 02919	

Johnston Public Schools  
10 Memorial Avenue  
Johnston, Rhode Island  
02919

May 23, 2007

To: Building Level Principals and Secretaries

Re: Procedures Volunteer Policy

**FORMS:**

The two (2) forms "Volunteer Disclosure Statement" and "Criminal Identification Records Policy" need to be completed by the potential volunteer and signed by the school principal.

**IDENTIFICATION:**

The school principal must get a legible copy of the applicant's picture driver's license.

**PROCEDURE:**

The school principal must forward the above three (3) items ("Volunteer Disclosure Statement", "Criminal Identification Records Policy", and copy of drivers' license) to BRENDA in the Superintendents office.

**LOCAL BCI CHECK:**

Brenda will submit these documents to the Johnston Police Department for processing. When the Police Department returns the information, Brenda will forward you the reports.

**NATIONAL FINGERPRINT BCI:**

The potential volunteer who IS required by Policy to obtain a national fingerprint will be required to go to the Rhode Island ATTORNEY GENERAL'S OFFICE, pay the fee and provide the School Department the documentation of finding.

**DISQUALIFYING INFORMATION**

If there is any disqualifying information concerning a potential volunteer, it will be noted by the Police Department or Attorney General's office.

It is the school Principal's responsibility to meet with that person and explain that he/she will not be able to participate due to the information contained in the report(s).

**MAINTAINING FILE**

The school principal shall store these reports in a secured file as these reports are not for public access.



