This is an important notice. Please have someone translate it for you.

ਇਹ ਇਕ ਜ਼ਰੂਦੀ ਨੋਟਿਸ ਹੈ। ਇਸ ਦੀ ਟਰਾਂਸਲੋਸ਼ਨ (ਅਨੁਵਾਦ) ਕਰਵਾਉ ਜੀ।



Harry Sayers Volunteers,

As we move ahead with the current school year, I would like to take some time to help guide those of you interested in volunteering at Harry Sayers. Below is important information for volunteering at our school.				
Name	of Volunteer:Parent Email:			
Name	of your Child(ren): Grade Level (s):			
<b>©</b>	Do you have a child at the school? Yes or No What is your purpose to be at the school? Field Trips? Coaching? Hot Lunch? PAC Events?			
Checkl	ist to complete for all Volunteers:			
1)	All Volunteers must have a Criminal Record Check (CRC) completed at the School Board Office (SBO) prior to starting at Harry Sayers. To do so, please book an appointment to go in to the SBO to fill out the Volunteer Consent form and provide 2 pieces of valid ID. email <a href="mailto:criminal.check@abbyschools.ca">criminal.check@abbyschools.ca</a> . Volunteer CRCs are free of charge. You will not be given a copy of the CRC nor does the school have a copy of it.			
	check when complete Criminal Check Expiry:			
	Initials of School Staff to confirm completion			
2)	All staff and volunteers are required to read the Communicable Disease guidelines and complete the on-line training and quiz (SWAY training) prior to starting. A link to do so will be provided from Mr. Colbert once the CRC process has been completed.			
	check when complete (confirmation sent to SBO when quiz completed)			
	Initials of School Staff to confirm completion /training has been sent			
3)	Please fill out the Abbotsford School District Volunteer Form AP 416-2, 416-4 & School Letter			
	check when ALL completeInitials of School Staff to confirm completion			
I can c	onfirm all the above is completed and volunteer is ready for the 2022-23 school year.			
Ryan (	Colbert Principal			
	you for your interest in volunteering at Harry Sayers Elementary. Should you have any questions, e to call the office at 604-852-9665 or email Mr. Colbert at ryan.colbert@abbyschools.ca.			
Sincere Mr. Co	ely, Ibert Principal Harry Sayers Elementary			

A



## Adult Volunteers

Thank you for your time and commitment to helping us at the school. The children will greatly benefit from your efforts. Our school motto is "The mission of the Harry Sayers community is to inspire in students a love of learning a quest for knowledge and respect for themselves and others. We feel it is important for all adults working in our building to model these values for the children. You can help with this by following these guidelines.

- Remember that everything you hear or see regarding the students is confidential.
- If you cannot make your scheduled time, please let us know.
- Treat all members of our school community with respect.
- Please wear your name tag while on the school grounds and in the school.
- You are working under a staff member's direction. Consult with that staff member before initiating activities.
- Please inform the supervising teacher of any concerns regarding student behaviour.
- Please be assured that information given by you will be kept confidential.

As a volunteer in our school you are in a position of trust and as such it is essential that privacy and confidentiality are maintained. Our children's safety is of prime concern to us. If children's safety or trust is compromised, we will find it necessary to ask you to relinquish your volunteer status. Your continued efforts and assistance are greatly appreciated. We look forward to working with you.

Thank you for your support.	
Staff :	· .
	se guidelines. I agree to a reference check and/or nould the principal of the school deem it necessary.
	•
Volunteer Signature	
200000000	<u> </u>
Date: NOTE: Please also read and sign the Confidentia	ality Understanding – Parent Volunteers and Non-Employees

Form (AP 416-4)



## AP 416-2 Volunteer Application Form

School Year:	(must be completed each school year)		
Name:			
Address:			
Phone:			
I have a child in this school:	Yes - (name/s)		
Areas of Expertise and Interest:	No		
☐ Tutoring (subject/s)	☐ Fundraising		
☐ Driving	☐ Food Days		
☐ Field Trips	: 🗅 Library		
☐ Coaching - (sports)	·		
☐ Special Events	☐ Classroom Help		
I agree to a reference check deems necessary. I have already had an APIC I have never been convicted I have never been refused p	k and/or Abbotsford Police Information Check (APIC), as the principal done at the following Abbotsford School District school as noted: d of an offense involving children/violence/illegal substances. permission to volunteer previously.		
Applicant Signature:	· ·		
पास्यवातास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्रास्त्र			
For Office Use Only			
Level of Risk: High Medium Low  Approved  Not Approved - (reason)			
Principal's Signature			



## AP 416-4 Confidentiality Understanding Parent Volunteers and Non-Employees

NAME:

Per:	urity arrangements against such ris sonal information is any informatic rmation.	-	•			
eled inte	ndividuals with access to records, octronic, etc.), which contain person egrity and confidentiality of those releasers) of the Freedom of Informa	al or confidential information, a ecords. A person who contraver	nes section 30.4 (unauthorized			
Abl Cor info	nfidential records are created with potsford School District except thou offidential records include records cormation, District information that poses.	se persons who require the reco ontaining information about stu	dent information, employee			
Ind	ividuals who have access to persor	nal or confidential information:				
1.	Must acknowledge that they understand the obligation to protect the personal and confidential information of the District.					
2.	Must not release personal or confidential information to any person without the express consent of the school district.					
	3. Must <b>only</b> make use of personal or confidential information for the purpose for which it was disclosed to them.					
4,	<ol> <li>May not make any copies of any records containing personal or confidential information and to return any records provided to them in the course of acting as a volunteer to the District.</li> </ol>					
Pl∈	ase sign the statement below.	•				
I h	ave read and understand and will a	adhere to the above policy.				
Name (Please print)		Signature	Date .			
Witness (Please print)		Signature	Date			

POSITION:

A public body must protect personal information in its custody or under its control by making reasonable