

Germantown School District
Volunteer Coach/Advisor Agreement

I, _____, understand and agree that my involvement as a volunteer with the Germantown School District is performed with and under the following provisions:

1. My services as a volunteer are at the request, knowledge and control of Germantown School District through its administrators or teaching staff.
2. I will not be paid any salary or stipend for my services.
3. I will not be eligible for or request any benefits for my services. (Examples include but are not limited to: workmen compensation, health, dental, etc.)
4. I will be covered by Germantown School District liability insurance.
5. If any part of my volunteer activities, involve my transporting students by car, I must receive written authorization from an administrator or school district employee prior to providing such a service and must complete the appropriate school district form relating to the use of a car, its condition and minimum required insurance coverage.
6. I will familiarize myself with and adhere to all policies and procedures established by the Germantown Board of Education and administrative staff.
7. I will attend all in-service meetings designed to enhance student relationship skills as deemed necessary by the administration.
8. I give the School District permission to do both a criminal and/or noncriminal background check.
9. Information that I may learn about other children or their families in my role as a volunteer must be kept confidential. If I have concerns about anything that occurs during the time I am serving as a volunteer, I will bring them to the attention of the classroom teacher or the person supervising the activity.

I understand any false statements or misrepresentation of facts are grounds for dismissal. I hereby certify that the statements above are true and correct to the best of my knowledge and belief.

Signature

Date

Activity/Level

School

Administrator's Signature

Submit by Email

Print Form

GERMANTOWN SCHOOL DISTRICT

Volunteers

Contact Information:

Name:

Home Address

Telephone #:

email

Background Check Information

Date of Birth:

Maiden Name:

SSN

Building & Supervision Information

List the building (s) at which you volunteer/student teach:

Name of teacher (s) principal (s) to whom you report: