



COMMUNITIES IN SCHOOLS ON THE SOUTH PLAINS, INC.

Volunteer Agreement Statement

Name of Volunteer _____ Home Phone _____

Address _____ City _____ State _____ Zip _____

Cellular Phone _____ Work Phone _____ May we call your work? _____

As a volunteer for Communities In Schools on the South Plains, Inc, I understand that I am a welcomed guest on the school campus. I am part of a team and play a vital part to the schools' program. I am a helpmate and a go between for the school, CIS and the community. Believing this, I agree to:

- Sign in and out upon entering and leaving the school campus
- Serve as an adult role model on the campus and be an encouragement to the children I work with and those who may observe me.
- Work under the direction and supervision of a member of the CIS and/or school staff. The relationship is to be one of mutual respect and confidence.
- Support teachers and not supplant them. Teachers are responsible for content and instruction in the classroom. I will be receptive to new ideas.
- Be dependable and on time. The students are looking forward to having me here. If I am not able to attend, I will notify the appropriate person of absent.
- Be generous with praise and courteous with criticism.
- Have planning and evaluation periods with CIS staff and/or teacher. I will inform CIS staff of any problems that may occur.
- Lend a sympathetic ear to students and teachers. I will **KEEP CONFIDENTIAL** any information about students and teachers.
- Work within the rules of the schools, as set out by the principal and CIS personnel.
- Have **NO IN-PERSON CONTACT** with the student(s) of their family without permission from CIS staff/school principal.
- The volunteer understands that he/she is not to be considered an employee, agent or independent contractor employed by Communities In Schools or LISD for any purpose. The volunteer acknowledges that he/she will neither accept nor claim salary or benefits of employment, including but not limited to insurance, retirement benefits, worker's compensation, travel expenses, or any other form of compensation of any kind.
- The volunteer understands that he/she has no actual authority to bind or represent the Organization with regard to third parties. Accordingly, the volunteer may not sign or enter into any agreement or contracts on behalf of Communities In Schools On the South Plains, Inc.
- The volunteer acknowledges that the Organization shall have no liability for personal injury or property damage which may be suffered by the volunteer, unless such injury or damage directly results from the negligent act or omissions of state employees or authorized volunteers. Any and all negligence claims shall be expressly limited to claims approved by the state of Texas.

- The volunteer and the Organization agree that no person shall be subjected to discrimination on the basis of race, color, religion, sex, age, handicap, or national origin in the execution or performance of this Agreement.
- This agreement may be terminated at any time upon written notice of the volunteer or the Executive Director of CIS-SP.

I will schedule my visits with the CIS staff. A CIS staff will supervise volunteers. Occasionally, a working relationship must be terminated either by the volunteer/tutor/mentor or CIS/school. If able, I will give two weeks notice when I am no longer able to serve. CIS/school will make every effort to extend the same courtesy to me. CIS reserves the privilege of terminating a relationship without notice if it is deemed necessary.

I may be serving in the capacity of a volunteer, tutor or mentor on the campus. ✓ Check the appropriate box.

- As a volunteer, I will be working with CIS personnel or school staff.
- As a tutor, I will meet with students on the campus to provide extra instruction.
- As a mentor, I will meet with the student to serve as a listening, caring adult friend and a role model for that child.

Days I am available: Mondays Tuesdays Wednesdays Thursdays Fridays

Times Available: _____

Length of Commitment: _____

Any other information you would like us to know: _____

Special Skills/Interest: _____

I am interested in the following areas:

_____ Elementary (k – 5th) _____ Middle School (7th – 9th) _____ High School (9th – 12th)

Confidentiality Statement

As a Volunteer/Mentor for Communities In Schools on the South Plains, Inc. I understand and agree to adhere to the CONFIDENTIALITY POLICY, which states that all students information, including grade reports, attendance reports, TAKS scores, service log notes and any other information obtained from the school or outside agency, is strictly confidential information. I understand the CIS case managed files will remain locked to insure the safety and confidentiality information. I understand that any information that is shared regarding the students will remain confidential except in the case of abuse/neglect or someone reports the harm to another person. I will then report to the appropriate agency according to the State law.

Signature

Date

Office Use only

Supervising Staff _____ Assigned Campus _____

Date/Time _____ Volunteer Mentor Tutor Clerical