



# HAMILTON

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## LOCAL SCHOOL DISTRICT

### VOLUNTEER CHECKLIST

Any person interested in volunteering for any activity (field trip, band, sports...) must complete the following packet. Every three (3) years a new BCI background check must be done before volunteering.

It is understood that each of the following must be completed entirely and be checked off and verified by the Administrative Office, located at 775 Rathmell Road, Columbus 43207, PH#491-8044x1202, please see Chrysis Thompson. BCI finger printing can be done at the Administrative Office at the cost of \$27.00. If you have not lived in Ohio consecutively for the last 5 years you will also need to have an FBI background check done at a cost of \$30.00. Payment must be made in cash, check or money order, at the time background check is done.

An approved volunteer does not have open access to the school buildings. The volunteer must have approval from the Administrator of the building for any activities they will participate in. If there is any falsification of information the volunteer shall be disqualified immediately.

**VOLUNTEER NAME:** \_\_\_\_\_

**ADMINISTRATION USE ONLY:**

- Volunteer Information Sheet
- Volunteer Code of Conduct
- Volunteer Release and Indemnification Agreement
- BCI (Bureau of Criminal Identification) Complete
- FBI (Federal Background Check) if not lived in Ohio consecutively the last 5 years.
- Photo Copy of Drivers License

\_\_\_\_\_  
Processed by

\_\_\_\_\_  
Date

\_\_\_\_\_  
Recheck Date



# HAMILTON

## LOCAL SCHOOL DISTRICT

### VOLUNTEER INFORMATION SHEET

NAME: \_\_\_\_\_  
(LAST NAME) (FIRST NAME) (MI)

ADDRESS: \_\_\_\_\_  
(CITY) (ZIP CODE)

PHONE #: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
(HOME) (CELL)

SOCIAL SECURITY #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CHILDREN IN DISTRICT: \_\_\_\_\_  
\_\_\_\_\_

#### IN CASE OF EMERGENCY CONTACT:

NAME: \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_

#### MEDICAL CONDITIONS / MEDICATIONS:

(Please list facts concerning any medical history, including allergies, medications being taken and any Physical conditions to which the school should be alerted to.)

\_\_\_\_\_  
\_\_\_\_\_

#### IN WHAT CAPACITY WILL YOU BE VOLUNTEERING (Please check all that apply):

General  Bands  Sports (additional paperwork may be required)

\_\_\_\_\_  
(SIGNATURE) (DATE) \_\_\_\_/\_\_\_\_/\_\_\_\_



# HAMILTON

## LOCAL SCHOOL DISTRICT

### VOLUNTEER CODE OF CONDUCT

The following Code of Conduct applies to all individuals who provide volunteer services in the Hamilton Local School District. An approved volunteer does not have open access to the school buildings. The volunteer must have approval from the Administrator of the building for any activities they will participate in. If there is any falsification of information or actions that are inconsistent with the Code of Conduct, or District Policy, the volunteer shall be disqualified immediately.



#### Volunteers must:

-  Treat everyone with respect, patience, integrity and courtesy.
-  Behave and dress in compliance with the Student Handbook.
-  Put safety first and adhere to all school safety protocol.
-  Respect the rights of individuals without regard to race, color, religion, national origin, disability, sexual orientation, age, sex or marital status and maintain the appropriate level of confidentiality.
-  Report any illegal activity to the School’s Administrator or appropriate staff member.
-  Take instruction from and not obstruct the responsible staff member in any way in regards to the execution of their duties.



#### Volunteers must not:

-  Smoke or use tobacco products while volunteering and/or on school property.
-  Use, possess, distribute or be under the influence of alcohol or drugs at any time while volunteering and/or on school property.
-  Verbally harass, use profanity, abuse, inappropriately touch, threaten, and intimidate students, staff or any individual while volunteering and/or on school grounds.
-  Disclose, use or disseminate student photographs or personal information about students, staff.

I understand and agree to adhere to the “Volunteer Code of Conduct” at all times and failure to do so can result in my immediate removal as a volunteer.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

