

Please complete this application form if you are interested in becoming a Brunswick School Department volunteer. Once you complete the form, click the submit button at the bottom.

Contact Information

| First name: | | |
|--------------------|---|--------------------------------|
| Last name: | | |
| Street 1: | | |
| Street 2: | | |
| City: | | |
| State: | O-MA O-ME | |
| Zip: | | |
| Home phone: | | |
| Work phone: | | |
| Cell phone: | | |
| of our volunteers. | O-Associate degree O-College degree O-Doctoral degree O-High school O-Masters degree O-Some college O-Trade/Vocational school | dea of the demographic make-up |
| Skills & Experie | nce r experience below that may be applicable. | |
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| <u>Availability</u> | | | | | | | | |
|--|---|---------------|----------------|----------------|------------------|----------------|----------------------|----|
| Please indicate the da | ys and times | you are usu | ally available | e to volunteer | •. | | | |
| | Mon | Tue | Wed | Thu | Fri | | | |
| From: | | | | | | | | |
| To: | | | | | | | | |
| | | | | | | | | |
| Site Preference | | | | | | | | |
| Please select your site Dlease select "All Scho | | | | more than on | e). If you are o | pen to volunte | eering at all school | s, |
| Assignment Preference: | □-All Schoo | ls [All Schoo | ols\Volunteer | Services] | | | | |
| | □-Brunswick High School [BHS\Volunteer Services] | | | | | | | |
| | □-Brunswick Jr. High School [BJHS\Volunteer Services] | | | | | | | |
| | □-Chess Club [BHS\Volunteer Services] | | | | | | | |
| | □-Coffin School [Coffin\Volunteer Services] | | | | | | | |
| | □-Harriet Beecher Stowe School [HBS\Volunteer Services] | | | | | | | |
| | □-REAL School [REAL School\Volunteer Services] | | | | | | | |
| | □-Watch D. | O.G.S. [HBS | S\Volunteer S | Services] | | | | |
| | | | | | | | | |
| Emergency Con | tact | | | | | | | |
| n the event of an eme | rgency whon | n should we | notify? | | | | | |
| First name: | | | | | | | | |
| Last name: | | | | | | | | |
| Home phone: | | | | | | | | |
| Cell phone: | | | | | | | | |



Email

We like to keep volunteers informed of important news, schedules, and volunteer opportunities by email, however will not send you any email you prefer not to receive. Use the checkboxes below to select the kinds of email you would like to receive from us.

| Email address: | |
|--|--|
| What kinds of email would you like to receive? | ☐ Electronic newsletters |
| | ☐ Recruitment appeals |
| Mandatory Back | ground Check |
| agreement box grants a | required for anyone applying to volunteer within Brunswick schools. Your initials in the final authorization for Brunswick School Department to perform a background check through the Maine afety. Findings will remain confidential. |
| Date of birth: | |

Confidentiality (FERPA)

A NOTE ABOUT CONFIDENTIALITY

Confidentiality is one of the most important aspects of being a volunteer with the Brunswick School Department. Protecting the privacy of all students and their families is the law as protected under the Family Educational Rights and Privacy Act (FERPA). Please read through the entirety of Brunswick School Department's FERPA guidelines, listed below, and indicate you have done so with a check in the final agreement box and the submission of this application. For me in depth information on this law, visit Maine DOE's website: http://www.maine.gov/doe/specialed/support/policies/faq/ferpa.html

Remaining confidential is essential and no information about students may be shared with others outside of the school. Should you observe anything that raises concern, please go directly to your school's principal.

Brunswick School Department School Volunteer Confidentiality Agreement

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) final regulations prohibit the sharing of student information and educational records without specific parent permission.

As a volunteer in our schools, you may encounter sensitive information due to self-disclosure by students, direct observation of activities, or by other means. This could include names of students, special programming provided to students, academic work, and/or behavioral information. It is critical that you treat such information with extreme confidentiality.

If you are concerned about a student's well-being, based on information you encounter during your volunteer work, please immediately report this to a school staff member.

Volunteer Confidentiality Statement:



The importance of confidentiality with respect to all student information has been explained to me. I understand the confidential nature of information that may be gleaned during classroom visits, interactions with students, and observation of classroom activities, and I understand the legal and ethical importance of protecting all such information. I will not share any personally identifying information about any student with other individuals or agencies. My understanding is signified by the submission of this volunteer application.

Confidentiality Agreement and Background Check

I understand and agree that submitting this application form does not automatically register me as a Brunswick School Department volunteer, and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures before I may begin volunteering.

By checking "I agree" below I grant authorization for Brunswick School Department to perform a background check through the Maine Department of Public Safety. Findings will remain confidential.

The submission of this form indicates that I have read and agree to the Brunswick School Departments FERPA and confidentiality guidelines.

By submitting this form, I attest that the information I have provided on this form is true and accurate. ☐ I Agree