### ADULTS THAT WILL PARTICIPATE IN THE CLASSROOM WITH CHILDREN

The Volunteer Application requires signature approval from the school administrator. Return your Volunteer Application either to your teacher, or to Garrison Weeks at 5735 47th Avenue, Sacramento, CA 95824 between the hours of 8:00 a.m. to 3:00 p.m.

ONCE YOU HAVE SUBMITTED YOU COMPETED VOLUNTEER APPLICATION, YOU WILL BE GIVEN THE FINGERPRINTING FORM TO COMPLETE T HE NEXT STEP.

#### REQUEST FOR LIVE SCAN SERVICE

Applicant Submission A0281 LICENSE/CERTIFICATION/PERMIT  $\mathsf{ORI}$  (Code assigned by DOJ) Authorized Applicant Type Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned) Contributing Agency Information: Agency Authorized to Receive Criminal Record Information Mail Code (five-digit code assigned by DOJ) Street Address or P.O. Box Contact Name (mandatory for all school submissions) Sacramento CA City State ZIP Code Contact Telephone Number \*Required Fields Applicant Information: \*Last Name \*First Name Middle Initial Suffix Other Name: (AKA or Alias) \*Last Name \*First Name Suffix Sex Male Female \*Driver's License \*Date of Birth Number Billing Number \*Height \*Weight \*Eye Color \*Hair Color (Agency Billing Number) Misc. \*Place of Birth (State or Country) \*Social Security Number Number (Other Identification Number) \*Home City State ZIP Code Address Street Address or P.O. Box I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights. \*Date \*Applicant Signature ⋉ FBI DOJ Level of Service: Your Number: \*OCA Number (Agency Identifying Number) (If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.) If re-submission, list original ATI number: Original ATI Number (Must provide proof of rejection) Employer (Additional response for agencies specified by statute): **Employer Name** 

Street Address

# PARENT PARTICIPATION PRESCHOOL PROGRAM INTEREST AND AGREEMENT FORM

This form is for interested participants and constitutes an agreement to partici pate in the Parent Education Preschool Program (PPPP) for the 2024-2025 school year and subject to the PPPP obtaining the required number of participants.

By completing the form below and providing your signature, you understand that this form constitute is an agreement to participate in the PPPP, including - but not limited to - paying associated parent fees on time outlined in the fee schedule directly below, completing the Sacramento City Unified School District's volunt eer guidelines and requirements, and adhering to the PPPP policies outlined in the Parent Education Preschool Program Contract.

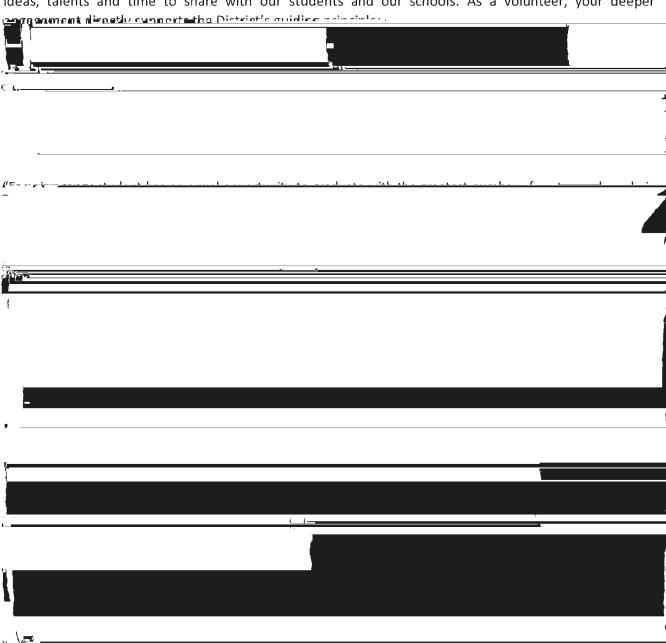
The program follows the exact school term to be set by the district. Participants are responsible for the entire

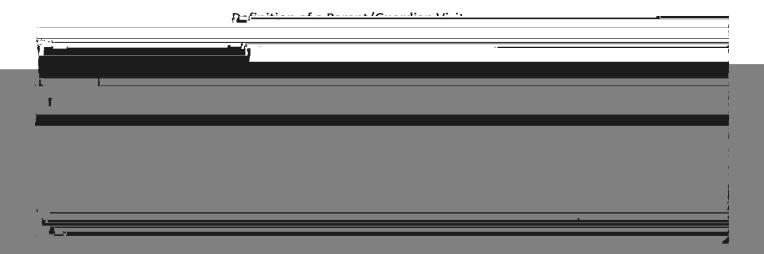


**School District** 

#### Dear Volunteer,

We are pleased that you have decided to participate in the Sacramento City Unified School District (SCUSD) Volunteer Program! As parents, grandparents, neighbors and community members you have valuable ideas, talents and time to share with our students and our schools. As a volunteer, your deeper

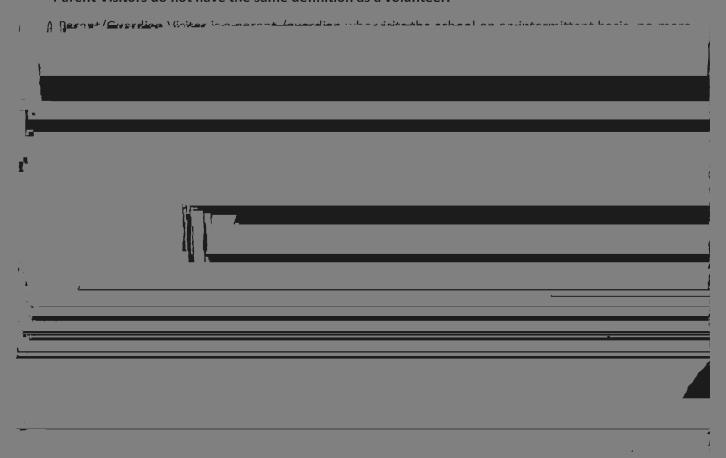




Sacramento City Unified School District wants to encourage parents/guardians to be active participants in their child's education. While some parents/ guardians may not be able to volunteer on a regular basis, there

\*Parent Visitors do not have the same definition as a volunteer.

are still opportunities to be involved at the school site.



, to participate in activities in view of school staff, and are never  $% \left( 1\right) =\left( 1\right) \left( 1$ 

alone with students.

#### **SCUSD Visitor Code of Conduct**

As a Visitor, we require that you follow our SCUSD Visitor Code of Conduct

Inderstand that your role is a supportive one. The teacher and principal are com	····
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	( ) <u>1</u>

You must not be left in charge of a classroom. You may not be alone with students.

Remember, visitors in a classroom for observation of their student may not interrupt teaching. If you have questions for the teacher, please ask them outside of class time.

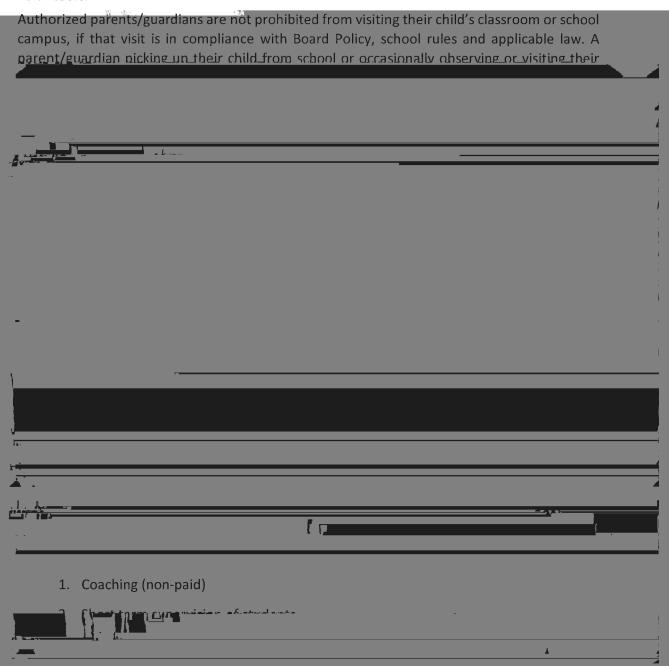
Maintain student confidentiality at all times. Do not discuss any student other than your own.

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#### **Definition of a SCUSD Volunteer**

#### **Volunteer Definition**

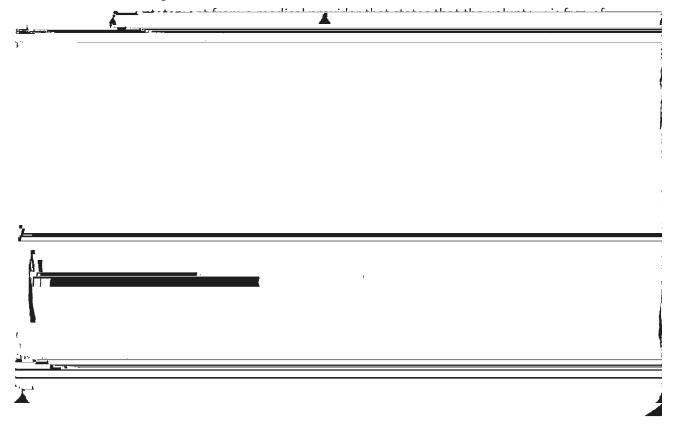
A volunteer is a parent/guardian, community member or other adult who assists at a school site or program on a regular or semi-regular basis in a non-essential role. Also, parents/guardians who observe or visit their child at school on a scheduled basis and stay more than 15 minutes each time are considered volunteers.



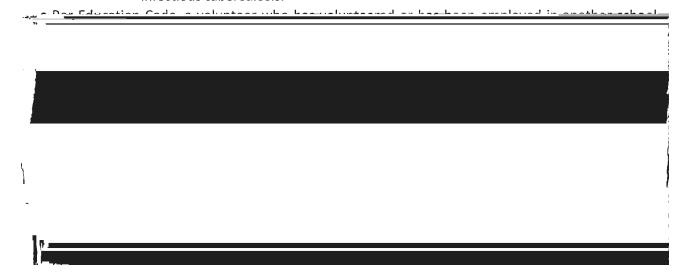
- 3. One on one tutoring or mentoring outside the classroom or other supervised setting
- 4. Attending or chaperoning school sponsored trips

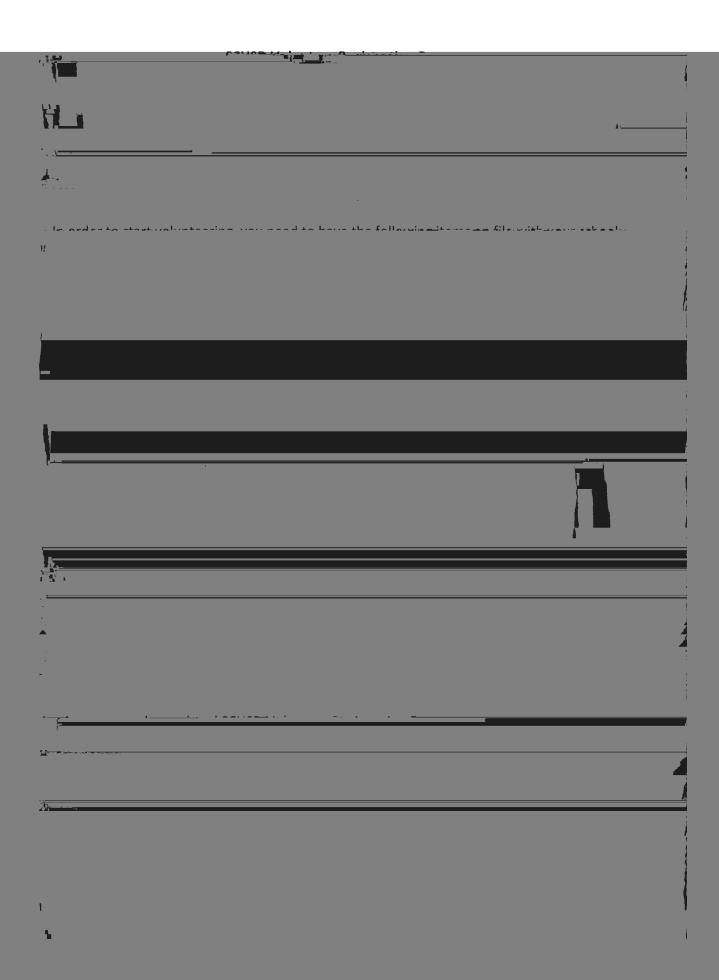
#### **Volunteer Identification:**

- Volunteers are required to sign in at the front office and wear Identification badges.
- Volunteers must provide documentation, dated within the past 60 days, showing they are free of infectious tuberculosis (TB). They may provide <u>one</u> of the following:
  - o a Certificate of TB Risk Assessment and/or TB Examination
  - o a negative TB Test



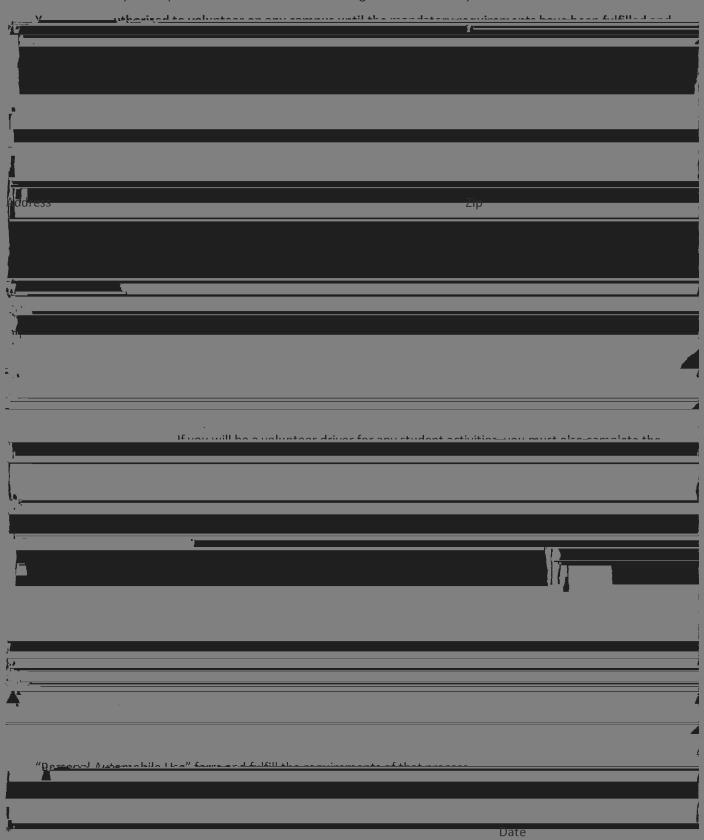
infectious tuberculosis.





## **SCUSD Volunteer Registration Form**

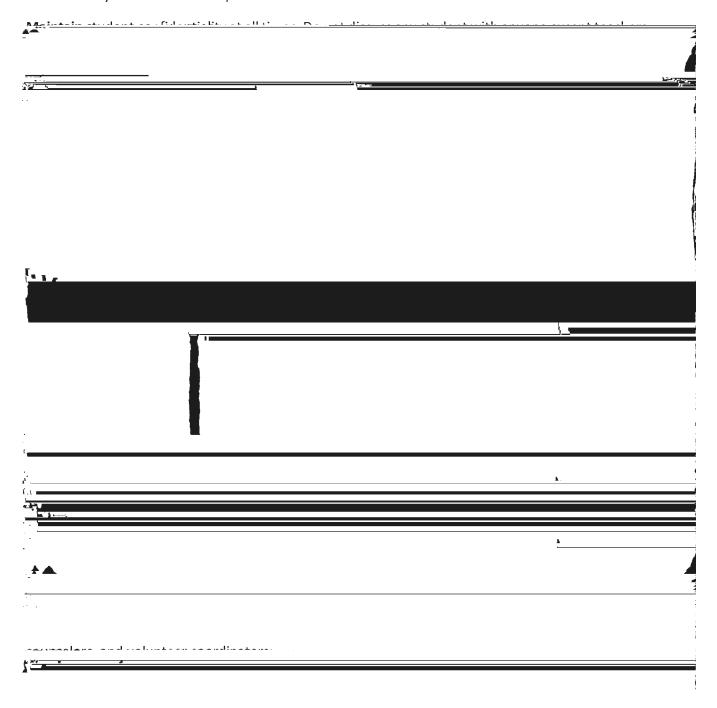
Thank you for your time and interest in becoming a Sacramento City School District Volunteer!

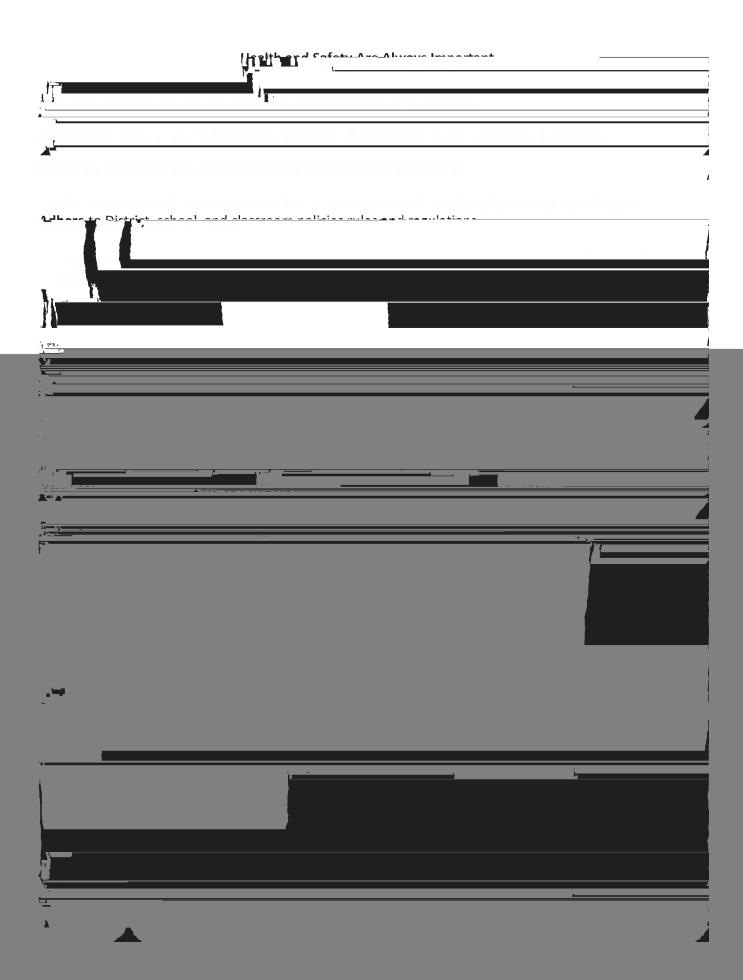


## SCUSD Volunteer Code of Conduct As a Volunteer, Your Role and Responsibilities in the School Are Unique

**Understand** that your role is a supportive one. The teacher and principal are completely in charge. If the teacher leaves the room, the teacher in the next room assumes responsibility. You must not be left in charge of a classroom.

**Remember** volunteers are only permitted to work with students on school grounds and under the supervision of certificated staff. Have no outside contact with an individual student unless authorized by administration or parents.





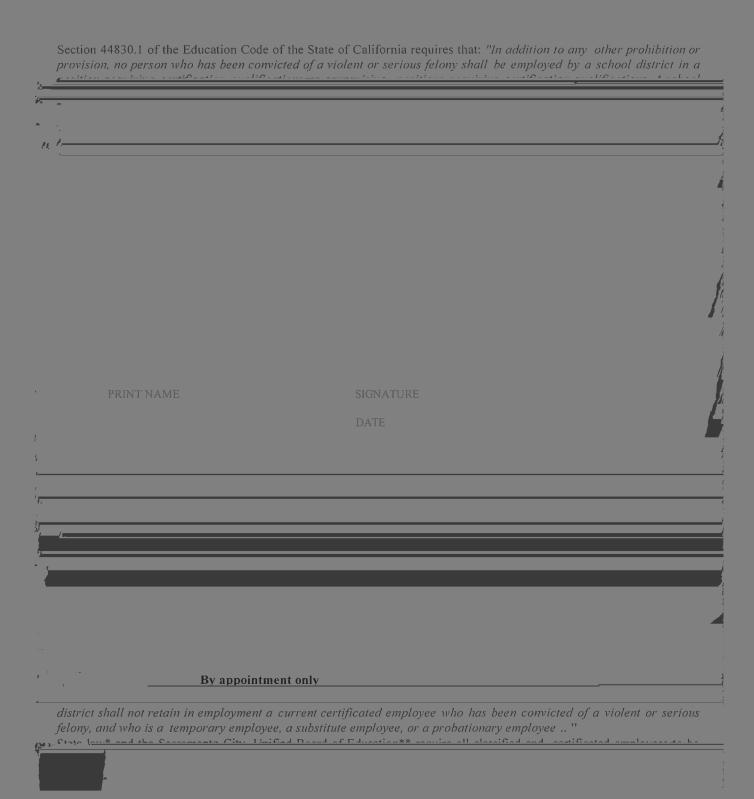
SITE/PROGRAM

## **NISTRATOR SIGNATURE**



#### SCUSD Volunteer PRIOR to b

NOTE: Site Administrator or Department Designee's Signature is mandatory to apply as a SCUSD Volunteer  [Pronting Code 63F03 prohibits the District from allowings person required to register as a cay offender under Benefic.	ones ob
to serve in a volunteer capacity as an aide or supervisor of students. Accordingly, the District will, before authorizing a production Code 635031.1 and for call the Department of the Code 635031.1 and for call the Code	



#### **VOLUNTEER INTEREST FORM**

Name	Site/Program		
Home Phone	Cell Phone		
Child's Teacher:			
I am interested in volunteering in the [] Classroom Helper	following areas (check all that apply):		
[] Reading to Children			
[] Share hobby or career information			
[] Field Trip chaperone	[] At-home work for classroom		
[] Yard/Cafeteria Assistance	[] Volunteer Coordination		
[] Library Assistance	[] Photograph events		
[] Child care during on-site event	[] Athletics		
1 Francisco London			
[] Community Gardens	[] Assist with fundraising		
[] One-time family events  Availability:	[] Assistant Coach		
<b>Monday</b> Tuesda	y Wednesday Thursday Friday		
Morning			
Afternoon			
PHOTO RELEASE			

Regulation: SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

Approved: November 16, 1998 Sacramento, California

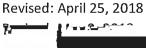
Reviewed: June 11, 2002 Revised: May 23, 2006

Revised: March 15, 2011

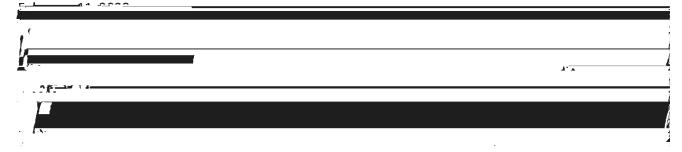
Revised: September 12, 2011



Revised: September 9, 2014



Revised: May 21, 2018 Revised: June 6, 2018 Revised August 1, 2018 Revised June 25, 2019 Revised October 2021



November 14, 2022 November 1, 2023 August 1, 2024