



**HOWARD GARDNER  
COMMUNITY SCHOOL**

# **Volunteer Handbook**

**647 E Street  
Chula Vista, Ca 91910  
(619)934-0300  
[www.hgcschool.org](http://www.hgcschool.org)**

# VOLUNTEER GUIDELINES

## DEFINITIONS:

1. A **visitor** is defined as an individual who, with authorization, attends a student performance, special event, festival, back-to-school event, student conference, etc.

A visitor must sign a registry located at the school office.

-Examples of a visitor include: parents, guardians, community members, etc.

2. A **guest** is defined as an individual, with authorization, assisting students and teachers on a non-regular basis or who individually observes a classroom or activity. A guest may also assist with educational programs or with special events on an occasional or infrequent basis. A guest is required to report his or her presence at the school office and sign in.

-Examples of guests include: vendors, elected officials, individuals observing a classroom, employees from other sites, etc.

3. A **volunteer** is defined as an individual who, with authorization, voluntarily assists schools, educational programs, or students on a regular and ongoing basis. A volunteer is required to complete a Volunteer Application, Code of Conduct, submit a negative TB test completed prior to rendering services.

## REGISTRY PROCEDURES:

1. All persons other than school site employees and students are required to register in and out each time they are on campus.
2. The registry shall include the first and last name, date, location, and time the volunteer reported and departed.
3. All visitors, guests, and volunteers shall be required to wear some form of identification issued by the school office.

## **PROCEDURES FOR BECOMING A SCHOOL VOLUNTEER**

1. Volunteers are required to complete a School Volunteer Application **each year** prior to volunteering.
2. Volunteers must sign a Volunteer Code of Conduct prior to volunteering.
3. Volunteers, by law, will also need a valid tuberculosis clearance (valid for 4 years) prior to volunteering.
4. Volunteers need to present a valid state issued identification. Copy of the original will be made.
5. **ALL VOLUNTEERS MUST BE SUPERVISED BY A STAFF MEMBER AT ALL TIMES.**
6. **NO VOLUNTEER SHALL BE LEFT ALONE WITH STUDENTS.**

**Note:**

A copy of these records will be kept in the Human Resources Department.

# SCHOOL VOLUNTEER APPLICATION

Information provided on this form is confidential and will be used only for Volunteer Program purposes

DATE \_\_\_\_\_

FULL NAME \_\_\_\_\_  
(First) (Middle) (Last)

ADDRESS \_\_\_\_\_  
(Street) (City) (State) (Zip)

DATE OF BIRTH \_\_\_\_\_ HOME/CELL NUMBER \_\_\_\_\_  
MO/DATE/YEAR

EMAIL \_\_\_\_\_

VALID DRIVER'S LICENSE/STATE ID/OTHER VALID PICTURE ID# \_\_\_\_\_

Do you have any criminal charges pending against you?  YES  NO

If so, please explain: \_\_\_\_\_

Have you ever been convicted of a felony?  YES  NO

Have you ever been convicted of a sex or drug-related offense or crime of violence?  YES  NO

Are you required to register as a sex offender under Penal Code 290.95?  YES  NO

Are there any custody agreements or court orders that would limit or prevent you from access to any student at this school?  
If yes, please write an explanation on the back of this paper.  YES  NO

**"I understand that HGCS may research my personal and professional background. I give my permission to have my personal and professional references researched and hold HGCS and any individuals providing information harmless. I also understand that I may have a criminal history check run by law enforcement if I serve as a volunteer. It is possible that as a volunteer I may have more than occasional or infrequent contact with students. Under Penal Code 290.95 I am required to disclose to school officials if I am a registered sex offender. My failure to disclose this fact could result in my arrest, prosecution, and likely fine and imprisonment. By placing my name below, I declare under penalty of perjury, that I am not required, pursuant to Penal Code 290.95 to disclose to school officials that I am a registered sex offender, and that I have not suffered convictions for sex or drug offenses or for crimes of violence, and there are no criminal charges pending against me. I agree to abide by HGCS safety and health rules and regulations."**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# VOLUNTEER CODE OF CONDUCT

**As a volunteer, I agree to abide by the following code of volunteer conduct:**

1. Immediately upon arrival, I shall register at the front desk.
2. I shall show volunteer identification at all times on school grounds.
3. I shall only use adult bathroom facilities.
4. I agree to never be alone with students without the authorization of a school administrator.
5. I shall not solicit outside contact with students.
6. I shall maintain confidentiality outside of school and shall share any concerns that I may have with school administrators.
7. I agree to not transport students without written permission of parents or guardians and without the expressed permission of the school or district.
8. I will not disclose, use, or disseminate student photographs or personal information about students, self, or others without the expressed written permission of HGCS.
9. I will leave all discipline and consequences to HGCS staff.
10. I agree not to post, transmit, publish or display harmful or inappropriate materials that are threatening, obscene, disruptive or sexually explicit or could be construed as any form of harassment.
11. I agree not to threaten, disrupt or otherwise harass any school district personnel and take all concerns to the school site administrator.
12. I agree to do only what is in the best personal and educational interest of every child with whom I come into contact.

**I agree to follow HGCS Volunteer Code of Conduct at all times or my volunteer status shall be revoked immediately.**

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**Signature of Volunteer**

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**Date**

# **VOLUNTEER TUBERCULOSIS SKIN TESTING LOCATIONS**

## **County of San Diego**

690 Oxford Street  
Chula Vista, Ca 91911  
(619)409-3110

## **CVS-Minute Clinic**

645 East Palomar  
Chula Vista, Ca 91911

## **SanYsidro Health Center**

4004 Beyer Blvd.  
San Ysidro, Ca 92173  
(619)428-4463

## **Concentra**

524 Broadway  
Suite G  
Chula Vista, Ca 91911  
(619)425-8212

**\*If you currently have health insurance, please go to your health provider.**

**\*\*TB clearance is valid for up to four years.**