

PO Box 1720  
2618 W. El Paseo  
Oracle, AZ 85623  
[www.osd2.org](http://www.osd2.org)



**ORACLE**  
School District

## Volunteer Application



We appreciate your interest in sharing your time and talents by offering to volunteer in our school. To ensure the safety of students, Arizona statutes require some formalities such as fingerprinting and your certification regarding criminal offenses.

In addition to the above, our records require your application, a signed handbook sheet and emergency notification information in the event you have an emergency here at school.

Do you have a child enrolled at this school? Yes ☐ No ☐

If so, what is their name(s): \_\_\_\_\_

|   |               |
|---|---------------|
| <b>Print Name:</b> (Last, First, MI)  |               |
| <b>Email:</b>   | <b>Phone:</b> |
| <b>Address:</b>   |               |
| <b>Volunteer Activity/Program interested in (i.e. Reading Intervention, Classroom help, Clerical, Maintenance/Grounds, etc.):</b> |               |
| <b>Name of Teacher/Employee with whom you will be volunteering (if known):</b>  |               |
| <b>Days/Times available:</b>  |               |

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Oracle School District #2 Volunteer Emergency Card

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Insurance Co.: \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

Allergies: \_\_\_\_\_

In Case of Emergency Notify:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**OR**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Any Other Information You'd Like Us To Know:

[illegible]

**I hereby acknowledge that I have received a copy of the Oracle Elementary School District Volunteer Handbook and that I have read and will abide by its contents.**

I understand that, as a volunteer, I am not compensated for any services, including wages and insurance. I further understand that I have the right to terminate my arrangement at any time with or without cause, and the Oracle Unified School District has a similar right.

**I make this Agreement in order to provide and to be authorized to perform the following uncompensated services to the Oracle School District:**

- I am 18 years of age or older and know of no reason which would prevent me from performing the tasks required as detailed in the Volunteer Job Description, or that I am presently a student enrolled in the Oracle School District system.
- I have acquainted myself with what is required to perform those tasks, and I represent that I have the skill and ability to perform them.
- I assume full responsibility for my own safety and the safety of others.
- That I will perform the volunteer service in compliance with the standards and specifications established, or approved, by the District, and will honor the direction of District official, to suspend or terminate service.

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

- Immediately upon arrival I will sign in at the front office or designated sign in station.
- I will wear a volunteer identification badge at all times.
- I agree to never be alone with individual students without authorization of teachers and/or school authorities.
- I will not solicit outside contact with students.
- I agree not to exchange telephone numbers, home address, e-mail address (including social network information) with students for any purpose.
- I will maintain confidentiality outside of school and will share any concerns that I may have with teachers or school administrators.
- I agree not to transport students.
- I will not disclose, use or disseminate student photographs or personal information about students, self or others.
- I agree not to post, transmit, publish or display harmful or inappropriate matter that is threatening, obscene, disruptive or sexually explicit or that could be construed as any form of harassment.
- I agree not to photograph students.
- I agree only to do what is in the best personal and educational interest of every child with whom I come into contact.

All school district personnel are required by law (A.R.S 13-3620) to report suspected child abuse. Failure to do so is a crime. This applies to all employees and volunteers when acting in the scope of their work with Oracle School District. If abuse is suspected, contact the principal and or nurse for reporting procedures.

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

***Thank you for choosing to volunteer in the Oracle School District! We appreciate your support.***