

Dear Parents,

Parents have always been one of the greatest assets to Prairie Crossing Charter School. You are an integral part of the success of our school. We actively encourage all parents to volunteer their time and energy to the school in accordance with their respective availability, abilities, and interests. Some ways in which you may choose to assist in the school will bring you into contact with children other than your own. In order for these volunteer activities to run smoothly, it is important that parents are aware of and agree to abide by the following guidelines.

- Please remember the teacher is the leader of the classroom. All volunteer activities must be
 conducted under his/her direction and with his/her approval. This includes discipline. Due to
 school code, volunteers are not allowed to discipline any student. If there is a reason to
 discipline a student please bring him/her to a teacher or teacher assistant and explain the
 situation. The teacher or teacher assistant will then decide on an appropriate consequence.
- 2. It is possible that volunteers will have questions about general activities, rules or behaviors they observe in the classroom. Please do not discuss these issues or have other conversations with the teacher or assistant during class, as they need to stay focused on the students. Save these questions, then write a note or call the teacher after school.
- 3. Please remember that volunteering in the classroom is not the time to mini-conference about your child. It is important that your child understand that you are assisting all students in the classroom.
- 4. Volunteers must be aware of the need to maintain confidentiality with respect to the academic performance, behavior, or other aspects of a child's presence in the classroom. Please do not discuss classroom matters with anyone other than the teacher, principal or director.
- 5. The Prairie Crossing Charter School buildings are tobacco, alcohol, and drug-free zones.
- 6. No one, other than school staff, may take a student off campus without written permission of the parents and the school principal.
- 7. Unless otherwise authorized, all volunteers must remain within sight of a school staff member.
- 8. No one, other than approved school staff, may administer medicines (this includes all over the counter medication such as: Tylenol, cough drops, antihistamines) to students.
- 9. Due to possible food allergies no food, candy, or beverages are to be given to any students.
- 10. Refer any injury/accident to the classroom teacher/teacher assistant who will follow the proper procedures.
- 11. Volunteer forms must be completed annually for all school volunteering.

| Volunteer's Signature:_ | | | |
|-------------------------|--|--|--|
| Date | | | |

Volunteer Information - to be completed annually

| Please Print Clearly | | Today's Date: | / / | | | |
|---|---|---|---|--|--|--|
| Full Name: | | | | | | |
| Home Phone: | Er | Email: | | | | |
| Home Address: | City: | State: | Zip: | | | |
| Do you have any allergies of which v | we should be aware? | | | | | |
| Do you have any medical concerns of | of which we should be awar | re? (diabetes, seizures, etc. |) | | | |
| Who should we contact in case of en | mergency? | Phone: | | | | |
| | | Phone: | | | | |
| Volunteer's Confi | idential Statements / Assur | rances - to be completed a | nnually | | | |
| In order to provide a safe learning exchool, the following information is 1. Have you ever been convicted of, of under Illinois law or the laws of any 2. Have you ever been convicted, or sexual abuse, physical abuse, sexual 3. Have you ever been the subject of 4. Are you required to register as a s | required from all persons or plead guilty to a serious other state or country? Yes had an administrative find harassment or exploitation Yes f, or been listed as, the perp | who seek approved volunt misdemeanor, aggravatedNo ing, or violating any law in n, or any other crime relatNo petrator in a founded childNo | eer status. misdemeanor or a felony nvolving child abuse, ed to children? abuse report? | | | |
| 5. Do you currently have charges per listed above? | | oing investigations relatin | g to any of the situations | | | |
| 6. (For those who will be volunteer | Yes drivers) Has your driver's l Yes | license ever been revoked | or suspended? | | | |
| (A yes response to any of the above of | | | ator) | | | |
| By my signature, I agree that should the office and inform the school of a | - | ove change in the future I | shall immediately contact | | | |
| I further certify that the information filed in the office. | ı provided herein is comple | ete and correct. I understa | nd that this form will be | | | |
| Volunteer Signature | | Data | | | | |

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