



**TEMPLETON UNIFIED SCHOOL DISTRICT
VOLUNTEER**
(Category II who is always under the supervision of
an employee)

Name: _____ Date: _____

Email: _____ Phone: _____

Teacher Requesting Volunteer: _____ Grade: _____

School Site(s): _____

Activity(ies): _____

Date of Activity(ies): _____

The following steps listed below are necessary to be cleared as a Category II Volunteer.
Volunteer to return the completed packet and items to the Front Office at least one week prior to the activity.

Forms to be completed and returned:

- () Confidentiality Agreement
- () Volunteer Emergency Information Form

Copy Of:

- () Drivers License
- () TB clearance

Copy for Volunteer:

- () Megan's Law Document
- () TB Assessment Information

I acknowledge all the above completed information forms have been read, signed and returned

Signature: _____ Date: _____

For Internal Use Only

- () Packet turned in
- () TB Clearance:
- () Megan's Law Database
- () Volunteer Spreadsheet

Rcvd Date: _____
TB Clearance Rcvd.- Date: _____
Clearance Rcvd- Date: _____
Entered Date: _____

Initials: _____
Initials: _____
Initials: _____
Initials: _____



Templeton Unified School District CONFIDENTIALITY AGREEMENT - VOLUNTEERS

Students, employees, and parents/guardians have the reasonable right and expectation of privacy. In your capacity as a volunteer of Templeton Unified School District ("District") you may have access to information related to students, parents/guardians, employees or Board members. This information includes any personally identifiable data, information, and records collected, used, known, or kept by the District about a student whether in writing or verbally. Such information is **NOT** public information and shall be kept confidential.

ACKNOWLEDGEMENT

As a volunteer, my signature on the District Policy Acknowledgement form indicates that I understand the privacy expectations of students, their families, and staff members. I hereby shall, at all times, maintain the confidentiality of student behavior, academic performance, and/or social and personal situations. All personal information that I access or come to know through my role with the District with regard to employees and parents/guardians is NOT public information and shall be kept strictly confidential. I agree NOT to disclose or release such information to anyone, whether in public or private places, with friends or with family members, without first clearing such release with my immediate supervisor.

I hereby agree to abide by this agreement and will respect the confidentiality requirements described above and in accordance with Administrative Regulation 1240- Volunteer Assistance.

Today's Date: _____

Printed Name

Signature



TEMPLETON UNIFIED SCHOOL DISTRICT VOLUNTEER EMERGENCY INFORMATION

PERSONAL INFORMATION

Full Name (Last, First, M.I.): _____

Address: _____

Street Address

Apartment/Unit #

City

State

Zip Code

Home Phone: _____ Cell Phone: _____ DOB: _____

Email Address: _____

VOLUNTEER INFORMATION

Volunteer Position: _____

Teacher/Staff Contact: _____

EMERGENCY CONTACT INFORMATION 1

Full Name: _____

Cell Phone: _____ Work Phone: _____

Relationship: _____

EMERGENCY CONTACT INFORMATION 2

Full Name: _____

Cell Phone: _____ Work Phone: _____

Relationship: _____

MEDICAL INFORMATION

Medical Conditions: _____

Medications: _____

Allergies: _____

Family Physician: _____



TEMPLETON VOLUNTEER II CATEGORY CLEARANCE CHECK THROUGH MEGAN'S LAW

As a volunteer with TUSD, we will conduct a search on the Megan's Law website. Please see the information below regarding the use of this website.

California's Megan's Law was enacted in 1996 Penal Code § 290.46. It mandates the California Department of Justice (CA DOJ) to notify the public about specified registered sex offenders. Megan's Law also authorizes local law enforcement agencies to notify the public about sex offender registrants found to be posing a risk to public safety. Megan's Law is named after seven-year-old Megan Kranka, who was raped and killed by a known child molester who had moved across the street from the family without their knowledge. In the wake of that tragedy, the Kanka's sought to have local communities warned about sex offenders in the area. All states in the U.S. now have some form of Megan's Law.

The California Sex and Arson Registry is the source of sex offender information displayed on this website. This database contains registration information provided by the offender to local law enforcement agencies. This website indicates that some of the registrants are currently in violation of their registration requirements. Any information you may have on these individuals should be reported to your local law enforcement agency.



TEMPLETON UNIFIED SCHOOL DISTRICT

TB Assessment Volunteer Information

Every employee, substitute, and volunteer of the Templeton Unified School District is required to have a TB assessment done by a registered nurse. A copy of the certificate of completion of TB clearance must be on file with the District Office and is valid for four years.

A school nurse will be contacting you via phone to conduct a TB assessment. Please note, a TB assessment is a series of questions that may require a skin test.

Thank you