

As a potential volunteer in the Des Moines Independent Community School District,
I acknowledge and agree to the following statements:

I understand that as a volunteer with the Des Moines Independent Community School District all knowledge I gain regarding the academic performance, behavior and personal information of the children with whom I work is confidential.

I understand that if a child tells me something or I notice something that may indicate his/her safety is at risk or he/she is in emotional distress, I will report that information to the principal, teacher or an appropriate staff member as soon as possible.

I understand that any contact with students beyond the boundaries of the specific volunteer activity is discouraged, is not a part of Des Moines Public Schools programming, and will not be protected in terms of liability. This includes communication with students through the use of social media.

I understand that the Des Moines Independent Community School District does not discriminate on the basis of race, color, national origin, gender, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices.

I understand that submitting this information does not guarantee my acceptance as a volunteer, and that assignment of volunteer work is based on the assessments made by the District Volunteer Coordinator, school principals, and their staff.

I understand that if I have misrepresented any information provided on this application and/or I fail to adhere to district guidelines, I may have my application approval withdrawn.

I assume full responsibility for my actions and authorize the school personnel at the site I'm volunteering to act on my behalf in the event of an emergency situation.

Applicant Signature

Date

Please e-mail any questions to volunteers@dmschools.org

For School Use Only

A copy of Volunteer ID is on file ____ Release/Waiver Signed ____ Start Date _____