

**EPHRATA AREA SCHOOL DISTRICT  
803 OAK BOULEVARD  
EPHRATA, PA 17522  
(717) 721-1513**



**VOLUNTEER AND CHAPERONE MANUAL  
POLICIES AND PROCEDURES**

January 2012

**EPHRATA AREA SCHOOL DISTRICT  
803 OAK BOULEVARD  
EPHRATA, PA 17522**



**Importance of Volunteers/Chaperones**

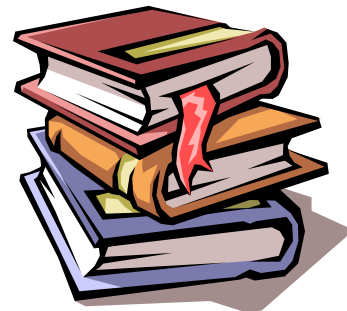
We greatly appreciate all of our volunteers/chaperones who provide much needed assistance to students and teachers in so many ways, from attending school field trips and musical competitions to Agri-Science activities and athletics. Volunteers/Chaperones provide countless hours of support to our District, dedicated to being a part of the scholastic world of our students.

We value our relationships with parents and the larger community, and welcome the opportunity for community members to offer their valuable time to supporting the mission of our District – to provide all students a secure learning environment and exemplary academic programs that inspire all students to reach their full potential.

This manual serves as a resource for all current and prospective volunteers/chaperones for the Ephrata Area School District. It contains District policies and procedures for volunteers/chaperones, including the processes to apply for clearances. Please contact the respective principal in the building where you seek to volunteer or chaperone if you have additional questions about the contents of this manual. You may also contact the Human Resources Department at (717) 721-1513 for answers to your questions.

Contact information for each school is as follows:

Akron Elementary School	(717) 859-0400
Clay Elementary School	(717) 721-1100
Fulton Elementary School	(717) 721-1130
Highland Elementary School	(717) 721-1160
Ephrata Intermediate School	(717) 721-1405
Ephrata Middle School	(717) 721-1468
Ephrata High School	(717) 721-1478



The Ephrata Area School District is an equal opportunity educational institution and will not discriminate on the basis of race, color, national origin, sex, religion, or disability in any of its activities, programs, or employment practices as required by Title VI, Title IX, Section 504, and the American Disabilities Act. For information regarding civil rights or grievance procedures, contact the District Office, 803 Oak Boulevard, Ephrata, PA 17522 at (717) 721-1513.

## School Board Policies Addressing School Volunteers/Chaperones

The Ephrata Area School District has three Board policies that address important rules and procedures for volunteers/chaperones. Board Policy No. 916 – *School Volunteers/Chaperones* provides volunteers/chaperones with specific information about the types of volunteering opportunities and the guidelines and requirements. Board Policy No. 907 – *School Visitors* establishes procedures governing school visits and Policy No. 917 – *Parent/Family Involvement* outlines guidelines for effective involvement in the schools.

The Board recognizes the vital role parents/families play in the education, welfare, and values of their children. The District is committed to the belief that all students can learn and acknowledges that schools, families, and the community share a commitment to the educational success of students. As noted in Board Policy No. 916,

*The Board recognizes that quality educational programs require the active support and involvement of everyone associated with our schools. School volunteers can make valuable contributions to the educational program. The use of school volunteers is endorsed by the Board, subject to legal requirements and administrative procedures.*

The District categorizes volunteers/chaperones using the titles provided below:

- Occasional Volunteer
- Supervised Special Events Volunteer
- Unsupervised Special Events Volunteer
- Regular Volunteer

## Steps for Becoming a Volunteer/Chaperone

In order to become a volunteer/chaperone, you must comply with the following requirements:

- ✓ Complete the ***Volunteer/Chaperone Application Form*** and ***Volunteer/Chaperone Disclosure Form*** located in the Appendix portion of this manual. The completed forms must be sent to the Human Resources Office, Ephrata Area School District, 803 Oak Boulevard, Ephrata, PA 17522.
- ✓ Complete the applications for the **required clearances** as noted by the volunteer/chaperone position you are seeking. The required clearances are issued through the Department of Public Welfare, Pennsylvania State Police, the FBI, and Pennsylvania Department of Education. All regular volunteers must also undergo a tuberculosis (TB) examination in accordance with the regulations of the Pennsylvania Department of Health. Please see *Volunteers/Chaperones Policy Summary* (page 3) for the specific clearances required for each classification of volunteer. The clearances and TB test are at the expense of the volunteer/chaperone, unless otherwise approved by an administrator.

## Volunteers/Chaperones Policy Summary

- **Occasional Volunteer** – any individual who serves as a volunteer without compensation for a limited number of times during a single school year and has contact with students only under the direct supervision of District staff. A homeroom parent is an example of this type of volunteer.
  - Yearly review and approval by building principal; copy of Volunteer/Chaperone Application Form kept in the respective building administrative office
- **Supervised Special Events Volunteer** – any individual who serves as a volunteer without compensation for special school events and has contact with students only under the direct supervision of District staff. Parents serving as a student chaperone at a dance, supervised chaperone on a single day field trip or a volunteer at a holiday party are examples of this type of volunteer.
  - *Child Abuse History Clearance* (\$10 money order payable to Department of Public Welfare)
  - *Pennsylvania State Criminal Record Check* (\$10 money order or certified check payable to Commonwealth of Pennsylvania)
  - *FBI Federal Criminal History Record Check* (\$36 registration fee online at [www.pa.cogentid.com](http://www.pa.cogentid.com))  
(All clearances must be given to Human Resources Department in the District Office.)
  - Tuberculosis (TB) Examination (obtain at your cost from a family physician; proof of TB screening must be given to Human Resources Department in the District Office)
  - Act 24/PDE 6004 form must be completed and signed (located in the Appendix portion of this manual)
  - **Chaperoning on a single day field trip** is also in this supervised special event volunteer category but only requires two clearances: **Child Abuse History Clearance and Pennsylvania State Criminal Record Check.**
  - Yearly review and approval by building principal; copy of Volunteer/Chaperone Application Form kept in the respective building administrative office
  - If a **break in service** occurs that covers a time period of one (1) school year during which an individual does not serve as a supervised special events volunteer, he/she will be required to renew the clearance checks
- **Unsupervised Special Events Volunteer** – any individual who serves as a volunteer without compensation for special school events such as field trips and has contact with students outside of direct supervision by District staff. A parent serving as a student group chaperone for a school day or overnight trip is an example of this type of volunteer.
  - *Child Abuse History Clearance* (\$10 money order payable to Department of Public Welfare) – reimbursable by District if purchased only for an overnight trip
  - *Pennsylvania State Criminal Record Check* (\$10 money order or certified check payable to Commonwealth of Pennsylvania) – reimbursable by District if purchased only for an overnight trip
  - *FBI Federal Criminal History Record Check* (\$36 registration fee online at [www.pa.cogentid.com](http://www.pa.cogentid.com))  
(All clearances must be given to Human Resources Department in the District Office)
  - Tuberculosis (TB) Examination (obtain at your cost from a family physician; proof of TB screening must be given to Human Resources Department in the District Office)
  - Act 24/PDE 6004 form must be completed and signed (located in the Appendix portion of this manual)

- Yearly review and approval by building principal; copy of Volunteer/Chaperone Application Form kept in the respective building administrative office
  - If a **break in service** occurs that covers a time period of one (1) school year during which an individual does not serve as an unsupervised special events volunteer, he/she will be required to renew the clearance checks
- **Regular Volunteer** – any individual who frequently and regularly serves as a volunteer without compensation and who has both supervised and unsupervised contact with students. A parent who comes to a classroom or the school on a regular basis to work with small groups of students is an example of this type of volunteer. Athletic and band volunteers are also examples.
    - *Child Abuse History Clearance* (\$10 money order payable to Department of Public Welfare)
    - *Pennsylvania State Criminal Record Check* (\$10 money order or certified check payable to Commonwealth of Pennsylvania)
    - *FBI Federal Criminal History Record Check* (\$36 registration fee online at [www.pa.cogentid.com](http://www.pa.cogentid.com))
      - (All clearances must be given to Human Resources Department in the District Office.)
    - Tuberculosis (TB) Examination (obtain at your cost from a family physician; proof of TB screening must be given to Human Resources Department in the District Office)
    - Act 24/PDE 6004 form must be completed and signed (located in the Appendix portion of this manual)
    - Yearly review and approval by building principal; copy of Volunteer/Chaperone Application Form kept in the respective building administrative office
    - If a **break in service** occurs that covers a time period of one (1) school year during which an individual does not serve as a regular volunteer, he/she will be required to renew the clearance checks.

Volunteers may be allowed to either participate or chaperone at school or school-sponsored activities while awaiting the return of clearances, so long as they are being directly and immediately supervised by a District employee, not directly interacting with children, and not volunteering for a period of more than 30 calendar days without such clearances. Prior to the start of the volunteering or chaperoning, volunteers/chaperones will need to sign the *Volunteer/Chaperone Disclosure Form* stating that their status as a working volunteer/chaperone is pending the results of the clearances. **No individual may be an Unsupervised Special Events Volunteer or Regular Volunteer until all required clearances and TB test results are in the District's Human Resources Office.**

No individual will be approved to serve as a volunteer or chaperone if the criminal history, child abuse, or FBI reports evidence of an offense which would preclude him/her from being employed in a Pennsylvania public school under Act 34, Act 114, or Act 151.

An individual who desires to visit a school for a specific purpose, such as a scheduled parent-teacher conference, or provide a one-time service that may involve a presentation to a class or the school, is not considered a volunteer or chaperone. A visitor will not interact unsupervised with children, and does not provide ongoing service to the District.

If an individual already has clearances that were obtained less than a year from the current date (for a previous community/church activity, etc.), these reports may be provided to the Human Resources Office.

If a **break in service** occurs that covers a time period of one (1) school year during which an individual does not serve as a volunteer or chaperone in any classification, he/she will be required to renew the clearance checks.



## **Guidelines for Volunteers/Chaperones**

The following guidelines must be followed when providing services to the District:

- Volunteers/chaperones must honor all applicable privacy laws and regulations. It is expected that confidential information about students, staff, other volunteers, or school district business be maintained as confidential. Anything that is overheard concerning students or staff should never be shared outside the building.
- Volunteers must sign in and out of the school office during all working hours unless they are working as an athletic coach.
- Volunteers must wear the name tag/identification provided at the sign-in. Volunteer athletic coaches do not need name tags.
- Volunteers/chaperones do not assume the professional responsibilities of school staff. Volunteers offer support and operate under the primary direction of staff.
- Volunteers/chaperones are not permitted to directly administer student discipline outside of the guidelines established by the building administrator. Similarly, volunteers should not administer first aid unless in the case of an emergency.
- Volunteers/chaperones should honor that safety is a top priority. They should become familiar with the surrounding area and make note of exits and safety equipment. Volunteers/chaperones must remain calm and protect themselves and others from accidents and injuries. School staff or the building administrator should be contacted in the case of an incident, and any relevant information must be relayed. Any accident involving a student, school staff, or volunteer that occurs on school property must be reported to the school office using the designated district accident report form.
- Volunteers/chaperones do not receive compensation for their services to the District. They are not Board-approved paid employees of the District.
- Volunteers/chaperones are provided the same liability insurance coverage during school-sponsored activities as provided for employees of the District.
- Volunteers/chaperones providing transportation to events with students must be given prior approval by the building administrator. Volunteers who transport students in personal vehicles must abide by all policies and procedures established by the District.

## **Compliance with Drug/Substance Abuse and Tobacco Use Policies**

The Ephrata Area School District works to maintain a safe and drug-free school campus. The District prohibits the use of controlled substances and tobacco on school property. The Board prohibits the use, possession, distribution, and being under the influence of any controlled substances during school hours, at any time while on school property, at any school-sponsored activity, and during the time spent traveling to and from school and school-sponsored activities.

Act 191 of the Pennsylvania Legislature of 1988 24 P.S. 5-527 requires that any employee of the Ephrata Area School District who is convicted of the delivery of a controlled substance or convicted of the possession of a controlled substance with the intent to deliver shall be terminated from his or her employment with the district – regardless of where the violation occurred. The same policy applies to volunteers/chaperones.

The Ephrata Area School District is dedicated to providing a healthy, comfortable, and productive environment for staff, students, and visitors. Because the Board is concerned about the health of its employees and because it recognizes the importance of adult role-modeling for students during the formative years, a tobacco free environment is enforced. The Board prohibits tobacco use by employees in a school building and on any property, buses, vans, and vehicles that are owned, leased, or controlled by the school district. The Board prohibits tobacco use by employees at school sponsored activities that are held off school property.



The volunteer/chaperone position is a privilege and not a right. Any volunteer/chaperone position may be eliminated at any time for any reason. Furthermore, any volunteer/chaperone may be removed from a volunteer/chaperone position for any reason.

---

***Achieving Success One Student at a Time***

**EPHRATA AREA SCHOOL DISTRICT**  
**803 OAK BOULEVARD**  
**EPHRATA, PA 17522**  
(717) 721-1513

**VOLUNTEER/CHAPERONE APPLICATION FORM**

*Directions:* Complete this form and return it with the Volunteer/Chaperone Disclosure Statement form to the Human Resources Department in the District Office.

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

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

\_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

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

Are you a parent or relative of a current EASD student? \_\_\_\_\_

Student's Name: \_\_\_\_\_ School: \_\_\_\_\_ Relationship: \_\_\_\_\_

Student's Name: \_\_\_\_\_ School: \_\_\_\_\_ Relationship: \_\_\_\_\_

Do you currently hold Act 34, 151, and 114 clearances? \_\_\_\_\_

(If you are an EASD employee, please answer "Employee")

If no, have you applied for these clearances: Yes / No      Date you applied for clearances: \_\_\_\_\_

If planning to be a Supervised Special Events Volunteer, Unsupervised Special Events Volunteer, or Regular Volunteer, do you have proof of a TB test?: Yes / No

Your signature below indicates that you have received and read the Volunteer/Chaperone Manual and agree with the terms.

**EMERGENCY INFORMATION**

Your Birth Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Alternate Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Special Health Problems / Allergies / Medications we should know about: \_\_\_\_\_

\_\_\_\_\_

Physician Preference: \_\_\_\_\_ Physician Phone: \_\_\_\_\_

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

In the event that I need emergency treatment requiring ambulance service and/or medical care, you have my permission to seek help as listed above or nearest MD/DO or ambulance/hospital available. I will assume responsibility for fees incurred by such an emergency (via my medical insurance if applicable).

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

3/10/10

**EPHRATA AREA SCHOOL DISTRICT**  
**803 OAK BOULEVARD**  
**EPHRATA, PA 17522**  
(717) 721-1513

**VOLUNTEER/CHAPERONE DISCLOSURE FORM**

*Directions:* Please read and complete all sections of the form.

Name (PLEASE PRINT): \_\_\_\_\_

Social Security #: \_\_\_\_\_ (For District Office Use Only)

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Circle the Appropriate Response:

I am / am not a resident of the Commonwealth of Pennsylvania.

Check All that Apply:

- I swear/affirm that I have mailed the requests for clearances to the Department of Public Welfare (Pennsylvania Child Abuse History Clearance); Pennsylvania State Police (PA State Police Request for Criminal Record Check); and Federal Bureau of Investigation at [www.pa.cogentid.com](http://www.pa.cogentid.com) (FBI Federal Criminal History Records for Prospective Employees).
  
- I swear/affirm that I have not been named as a perpetrator of a founded report of child abuse or as the individual responsible for injury or abuse in a founded report for a school employee.
  
- I swear/affirm that I have never been arrested for or convicted of any reportable offense.

I understand that by completing the requests for clearances and forwarding them to Ephrata Area School District, I can be provisionally assigned as a volunteer for 30 days pending receipt of all three (3) clearances. If the completed clearances have not been received by the 30<sup>th</sup> day, I will be released from any volunteer positions at Ephrata Area School District. Upon receipt of the satisfactory clearances, I may be reinstated to my previous volunteer assignment.

- I understand that as a provisional volunteer I must work within eyesight of a professional employee at all times.
  - I understand that I must be dismissed if I have been named as a perpetrator of a founded report of child abuse or as the individual responsible for injury or abuse in a founded report for a school employee.
  - I understand that I must be dismissed if I have been convicted of any of the crimes listed above within the past five years.
  - I understand that my volunteer involvement may be terminated if I have been convicted of any of the above crimes longer than five year ago, have been named as the perpetrator of an indicated report of child abuse or have been named as the individual responsible for injury or abuse of an indicated report for a school employee.
- I hereby swear/affirm that the information as set forth above is true and correct. I understand that the penalty for false swearing is a misdemeanor of the third degree pursuant to Section 4903 (b) of the Crimes Code.

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

11/22/11

**ARREST/CONVICTION REPORT AND CERTIFICATION FORM**  
(under Act 24 of 2011)

**Section 1. Personal Information**

Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Any former names  
by which you have  
been identified: \_\_\_\_\_

**Section 2. Report of Arrest or Conviction**

By checking this box, I report that I have been arrested for or convicted of an offense or offenses enumerated under 24 P.S. §1-111(e) ("Reportable Offense(s)"). See Instructions on Page 2 of this Form for a list of Reportable Offenses. If you have none to report, proceed to Section 3 of this form.

**Details of Arrests or Convictions**

For any arrest or conviction of any Reportable Offense, specify in the space below (or on additional attachments if necessary) the crime for which you have been arrested or convicted, the date and location of arrest and/or conviction, and the applicable court.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 3. No Arrest or Conviction**

By checking this box, I state that I have never been arrested for or convicted of any Reportable Offense.

**Section 4. Certification**

*By signing this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a Reportable Offense, shall subject me to criminal prosecution under 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

## INSTRUCTIONS

This standardized form has been developed by the Pennsylvania Department of Education, pursuant to 24 P.S. §1-111(j), to be used by current and prospective employees of public and private schools, intermediate units and area vocational-technical schools for the written reporting by current and prospective employees of any arrest or conviction for an offense enumerated under 24 P.S. §1-111(e).

As required by subsection (j)(2) of 24 P.S. §1-111, this form shall be completed and submitted by all current employees of a public or private school, intermediate unit or area vocational-technical school by December 27, 2011. In addition, as required by subsection (j)(4) of 24 P.S. §1-111, this form shall be utilized by employees to provide written notice within seventy-two (72) hours after an arrest or conviction for an offense enumerated under 24 P.S. §1-111(e) and occurring after September 28, 2011. In accordance with 24 P.S. §1-111, employees completing this form are required to submit the form to the administrator or other person responsible for employment decisions in a school entity. If you have questions regarding to whom the form should be sent, please contact your supervisor or the school entity administration office.

**PROVIDE ALL INFORMATION REQUIRED BY THIS FORM LEGIBLY IN INK.**

### LIST OF REPORTABLE OFFENSES

An offense enumerated under 24 P.S. §1-111(e) (a "Reportable Offense") consists of any of the following:

- (1) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:
 

<ul style="list-style-type: none"> <li>▪ Chapter 25 (relating to criminal homicide)</li> <li>▪ Section 2702 (relating to aggravated assault)</li> <li>▪ Section 2709.1 (relating to stalking)</li> <li>▪ Section 2901 (relating to kidnapping)</li> <li>▪ Section 2902 (relating to unlawful restraint)</li> <li>▪ Section 2910 (relating to luring a child into a motor vehicle or structure)</li> <li>▪ Section 3121 (relating to rape)</li> <li>▪ Section 3122.1 (relating to statutory sexual assault)</li> <li>▪ Section 3123 (relating to involuntary deviate sexual intercourse)</li> <li>▪ Section 3124.1 (relating to sexual assault)</li> <li>▪ Section 3124.2 (relating to institutional sexual assault)</li> <li>▪ Section 3125 (relating to aggravated indecent assault)</li> <li>▪ Section 3126 (relating to indecent assault)</li> <li>▪ Section 3127 (relating to indecent exposure)</li> <li>▪ Section 3129 (relating to sexual intercourse with animal)</li> <li>▪ Section 4302 (relating to incest)</li> <li>▪ Section 4303 (relating to concealing death of child)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Section 4304 (relating to endangering welfare of children)</li> <li>▪ Section 4305 (relating to dealing in infant children)</li> <li>▪ A felony offense under section 5902(b) (relating to prostitution and related offenses)</li> <li>▪ Section 5903(c) or (d) (relating to obscene and other sexual materials and performances)</li> <li>▪ Section 6301(a)(1) (relating to corruption of minors)</li> <li>▪ Section 6312 (relating to sexual abuse of children)</li> <li>▪ Section 6318 (relating to unlawful contact with minor)</li> <li>▪ Section 6319 (relating to solicitation of minors to traffic drugs)</li> <li>▪ Section 6320 (relating to sexual exploitation of children)</li> </ul>
---	---
  
- (2) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."
  
- (3) An offense **SIMILAR IN NATURE** to those crimes listed above in clauses (1) and (2) under the laws or former laws of:
  - the United States; or
  - one of its territories or possessions; or
  - another state or
  - the District of Columbia; or
  - the Commonwealth of Puerto Rico; or
  - a foreign nation; or
  - under a former law of this Commonwealth.