

## VOLUNTEER ACKNOWLEDGEMENT

MIFFLIN COUNTY SCHOOL DISTRICT

The undersigned hereby acknowledges that he/she is volunteering to perform services without compensation on behalf of the Mifflin County School District and that he/she understands that in the event of any injury to the person or property of said volunteer not directly caused by the neglect of the Mifflin County School District acting through its servants and employees, the Mifflin County School District shall have no liability therefore under workers compensation laws, tort law, or any other law. Said volunteer also acknowledges his/her understanding that even as to personal or property damage suffered by said volunteer while in the service of the School District which is directly caused by the negligence of the School District, acting through its employees or servants, that the laws of the Commonwealth of Pennsylvania provide that the Mifflin County School District is immune from liability for damages therefore subject to certain exceptions provided in said law and that even as to said exceptions, where the School District may be liable, the amount and nature of damages which may be claimed are expressly limited by said law.

In requiring the acknowledgment set forth above, the Mifflin County School District does not intend to expand or limit its liability to said volunteer as currently provided under Pennsylvania law. The intent of the School District is simply to provide a clear, concise statement of existing law so that the volunteer may be fully apprised of his or her legal rights with regard to personal injury or property damage prior to volunteering his or her services.

As a volunteer, I agree to abide by the following MCSD School Board policies:

- #248 – Student Unlawful Harassment
- #348 – Administrative Employees Unlawful Harassment
- #916 – Volunteers

\_\_\_\_\_  
VOLUNTEER NAME (PRINT)

\_\_\_\_\_  
SCHOOL

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
HOME TELEPHONE NUMBER

\_\_\_\_\_  
SPORT

\_\_\_\_\_  
ATHLETIC DIRECTOR SIGNATURE

\_\_\_\_\_  
SCHOOL ACTIVITY

\_\_\_\_\_  
ADVISOR SIGNATURE

\_\_\_\_\_  
VOLUNTEER SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SCHOOL PRINCIPAL SIGNATURE

\_\_\_\_\_  
DATE

**VOLUNTEER CONFIDENTIALITY AGREEMENT**  
MIFFLIN COUNTY SCHOOL DISTRICT

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There are federal and state laws that protect the privacy rights of students and families. In a school situation, there are many instances in which confidential information is discussed in order to better understand students and how we can help them. When working in the schools as a volunteer there may be times when this information is overheard. Our staff will make every effort to prevent this from happening; however, as a volunteer you must agree that if you do hear information, about a student or family you will not repeat this outside of the school. This will ensure the protection of our students' interest and their families, thus creating a better environment for all.

Additionally, three laws govern special education confidentiality. FERPA (Family Educational Rights and Privacy Act), IDEIA (Individuals with Disabilities Education Improvement Act), and Chapter 14 (Pennsylvania Special Education Guidelines). All three bodies of regulations indicate that confidentiality must be maintained relative to special education students. Therefore, any written or verbal communication with anyone who does not have a right to know is in violation of these laws. A volunteer should not discuss a child's disability with any individual outside of the classroom instructor, building principal, or staff member. The volunteer should not carry any written or verbal statements outside of the school that would divulge the child's disability. In essence, only those who work directly with the student are considered as those with a "need to know." If at any time these terms of confidentiality are violated by a volunteer, termination of volunteer services may occur.

**As a volunteer:**

- **I realize that I am subject to a code of ethics similar to that which binds the professionals in the field in which I work.**
- **I will keep confidential matters private.**
- **I also understand that volunteering in the MCSD program is a privilege and not a right. The school's principal reserves the right to deny or remove any volunteer violating confidentiality or any district policy.**

By signing this agreement I am stating that I will not divulge information about any student or family to any person outside the school setting.

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Date

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Volunteer Name (Print)

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Volunteer Signature

**VOLUNTEER AFFIDAVIT**  
**MIFFLIN COUNTY SCHOOL DISTRICT**

(In Lieu of Fingerprint based FBI Clearance to 23 Pa.C.S.A. §6344.2 (b1))

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

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Volunteer Position(s) Applied For: \_\_\_\_\_

I, \_\_\_\_\_ (Name) hereby attest that all information provided below is correct and current. I understand that any false statements can and will be punishable by law.

1. I hereby attest and understand that the volunteer position for which I am applying is an unpaid position.
2. I hereby attest that I have been a resident of the Commonwealth of Pennsylvania during the entirety of the previous ten-year period, i.e. from \_\_\_\_\_ [date ten years prior to current date], to the current date of this application.
3. I hereby swear and affirm that I have not been convicted of any of the following offenses under Title 18 (relating to crimes and offenses), or any offense similar in nature to the crimes listed below, under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

- Chapter 25 (relating to criminal homicide).
- Section 2702 (relating to aggravated assault).
- Section 2709.1 (relating to stalking).
- Section 2901 (relating to kidnapping).
- Section 2902 (relating to unlawful restraint).
- Section 3121 (relating to rape).
- Section 3122.1 (relating to statutory sexual assault).
- Section 3123 (relating to involuntary deviate sexual intercourse).
- Section 3124.1 (relating to sexual assault).
- Section 3125 (relating to aggravated indecent assault).
- Section 3126 (relating to indecent assault).
- Section 3127 (relating to indecent exposure).
- Section 4302 (relating to incest).
- Section 4303 (relating to concealing death of child).
- Section 4304 (relating to endangering welfare of children).
- Section 4305 (relating to dealing in infant children).
- A felony offense under section 5902(b) (relating to prostitution and related offenses).
- Section 5903(c) or (d) (relating to obscene and other sexual materials and performances).
- Section 6301 (relating to corruption of minors).
- Section 6312 (relating to sexual abuse of children).
- The attempt, solicitation or conspiracy to commit any of the offenses set forth in this list.
- A felony offense under the act of April 14, 1972 (P.L. 233, No. 64) known as The Controlled Substance, Drug, Device and Cosmetic Act, committed within the five-year period immediately preceding verification under this section.

I hereby verify and affirm that I understand that a conviction for any of the offenses outlined above or any similar offense under federal or other state law or former law disqualifies me from approval for service as an unpaid volunteer. I further understand and agree that I have an obligation to submit written notice to the Superintendent or other designated administrator disclosing any future arrest or conviction for any such offenses, and/or any notification that I have been listed as a perpetrator in a founded or indicated report, within 72 hours, of the occurrence of such arrest, conviction, or notification of listing as a perpetrator.

I hereby verify that all statements in the within Affidavit are true and correct to the best of my knowledge, information and belief. I understand that my statements are made subject to the penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities, which provides that if I knowingly make false averments, can and will subject me to criminal penalties.

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Attest/Witness: \_\_\_\_\_ Date: \_\_\_\_\_

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**REPORTABLE OFFENSE OBLIGATION**  
MIFFLIN COUNTY SCHOOL DISTRICT

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As required by statute, I fully understand that:

1. If I am arrested for or convicted of a Reportable Offense that is listed in Policy 916 or named as a perpetrator in a founded or indicated report I must provide written notification of the same to the District Superintendent's Office no later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the statewide database.
2. If the District has a reasonable belief that I was arrested or convicted of a Reportable Offense that is listed in Policy 916 or was named as a perpetrator in a founded or indicated report, the District can require me to update my clearances before being permitted to continue to volunteer in the District.
3. Willful failure to disclose this information is a misdemeanor in the third degree.
4. I must renew my clearances prior to the date of expiration.
5. In order to efficiently select volunteers for events requiring clearances throughout the District, my name only, will be listed on a District database of persons who have submitted clearances to be used for volunteer selection purposes only. Reports and information contained on the reports will remain confidential to the extent permitted by law.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
E-Mail Address

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This acknowledgement is being submitted to:

\_\_\_\_\_  
School Building Representative

\_\_\_\_\_  
Date of Receipt