

POLICY #916 – VOLUNTEER POLICY

**SOUTHERN COLUMBIA AREA SCHOOL DISTRICT
VOLUNTEER ACKNOWLEDGEMENT AND STATEMENT OF CONFIDENTIALITY**

I hereby acknowledge and agree that, in connection with my volunteer services I have received a copy of the Southern Columbia Area School District Volunteer Policy; I have read and understand the Policy and that I hereby agree to comply with and be bound by the Policy. I have also been provided an orientation program and written expectations necessary to perform the specific duties associated with my assignment(s).

I also understand that in the course of volunteer service with the Southern Columbia Area School District, I have a responsibility to maintain the confidentiality of any employee or student information that may have available to me in any form. I understand that it is my responsibility to assure rights and confidentiality of information both written and verbal. I understand that in the performance of my duties, I am not to discuss academic or other confidential information regarding students or employees with anyone. Any breach of confidentiality will be carefully reviewed and if substantiated could result in termination of volunteer involvement with the School District, and may result in legal action.

I acknowledge that I have read and understand this statement of confidentiality.

Volunteer Signature: _____ Date: _____

IN WITNESS WHEREOF, the undersigned has executed and delivered this document as of this
_____ day of _____, 20_____.

By: _____

Principal or designee will serve as the witness.

Thank you for volunteering your services to the SCA School District!