

**Larchmont Charter School
Volunteer Handbook & Application**

2014-2015

LARCHMONT SCHOOLS
444 NORTH LARCHMONT BOULEVARD #207
LOS ANGELES, CA 90004
323-380-7893

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Larchmont Charter School

Welcome Letter

Dear School Volunteer:

On behalf of Larchmont Charter School I would like to extend our appreciation for your dedication and support to our school and to our mission of improving the academic achievement of our students. Volunteers play an important and valuable role at our school. Students, teachers, staff, parents and community all benefit from the work of individuals like yourself who give of your time and talents. We know that you will benefit from this experience as well.

This handbook is directed at all volunteers who wish to devote a portion of his or her time to our school and students. We want you to get the most out of your volunteer experience and as such we want to make sure you are an informed volunteer.

Volunteers help in many different ways: tutoring, classroom assistants, playground supervision, library assistants, office assistants, field trip chaperones, team sports and special projects. We appreciate your hard work and dedication. On behalf of the teachers, staff, and students, we say "Thank You!"

If I can ever be of assistance to you, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read 'ES', with a long horizontal stroke extending to the right.

Eugene D. Straub
Executive Director

Definition of Volunteers

Volunteers are individuals who donate their time, without financial compensation, to benefit their communities. The volunteer participation at Larchmont Charter School may occur in a classroom setting during the school day or outside the school setting as part of an extracurricular activity. *A person who comes to the school for a one-time special event, such as a guest speaker, presenter, or visitor is considered a guest and not a volunteer.* School policy prohibits discrimination on the basis of actual or perceived disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sexual orientation, or any other characteristic that is contained in the definition of hate crimes set forth in Section 422.55 of the Penal Code or association with an individual who has any of the aforementioned characteristics.

Volunteer Opportunities include but are not limited to:

- Tutoring
- Mentoring
- Athletics
- Classroom assistance
- School/classroom events like career fairs and field trips
- Before/After-school programs
- Non-classroom (main office, library/media center, etc.) assistance

Volunteer Requirements

All volunteers are required to complete a "School Volunteer Application Form" and be screened for tuberculosis and depending on the volunteer assignment, may be subject to a criminal background check and in some cases, fingerprinting. All volunteers must have on file with the School a certificate showing that within the last four years the person has been examined and has been found to be free of communicable tuberculosis, in accordance with Health and Safety Code Section 121545. Food handlers are to be tested annually and provide evidence of negative results to Larchmont Schools. (Education Code 45106, 45347, 45349, 49406 & Health and Safety Code 121545)

Acceptance as a volunteer is based on factors including, but not limited to:

- No record of a serious or violent felony conviction (pursuant to Ed Code 45122.1) or requirement to register as a sex offender under California law (Penal Code 290)
- Live Scan fingerprinting, with clearance from Department of Justice for specified volunteers categories
- A completed "School Volunteer Application Form" on file
- Tuberculosis (TB) Clearance for specified volunteer categories
- Positive attitude; interest in and enthusiasm for working with children
- Ability to work cooperatively with school personnel and participate regularly
- Good communication skills, moral character, dependability, health and personal hygiene

Volunteer Categorization Guide

Volunteer Category I: Interacts directly with students with potential to be alone with students 1:1 or loosely supervised; *Examples:* classroom assistant, enrichment teacher.

Volunteer Category II: Interaction with students is always supervised, however contact is made; *Examples:* lunch duty or office support.

Volunteer Category III: Is on campus during special events or activities and are *never* alone with students; *Examples:* event planner/helper.

Volunteer category IV: Volunteer is a minor, who will work directly supervised by a chaperone at all times; *Examples:* minor volunteers in the office, classroom, after-school.

	Volunteer Application	Annual Megan's Law Check**	TB test*	DOJ	Agreement
Volunteer Category I	Y	Y	Y	Y	Y
Volunteer Category II	Y	Y	Y	Y	Y
Volunteer Category III	Y	Y	Y		
Volunteer Category IV	Y	Y	Y		Y permission slip

Adapted from the Larchmont Schools Board of Directors approved policy (dated September 10, 2013).

Suggestions for Making Your Volunteer Experience Successful

The following are suggestions that should prove helpful in developing a successful partnership with Larchmont Charter School students and staff.

1. Meet with the teacher/staff member before you start. Volunteers are placed with teachers or other staff members who have requested volunteer assistance. Some have specific roles and tasks for their volunteers, while others identify those tasks on an as-needed basis.
 - a. Ask questions if you are unclear about something
 - b. Keep communication open
2. Get to know the school grounds
 - a. Know the location and phone number of the school office
 - b. Know the location of important rooms such as the office, restrooms, staff lounge, etc.
 - c. Find out where to park
3. If you are volunteering in a classroom, spend some time observing the class.
 - a. Become familiar with classroom routines
 - b. Identify location of supplies and materials within the classroom
4. If you are volunteering on the playground, spend some time observing students.
 - a. Be well informed of the playground expectations, if you are unsure, ask a staff member.
5. Establish positive relationships with the students.
 - a. Be friendly; let them know you are glad to be here!
 - b. Be encouraging to students
6. If you are experiencing some problems with your placement, try to resolve them first with the teacher or staff member with whom you are working. If you need more assistance with your problem, please contact the Head of School.
7. When the teacher/staff member first orients you, the following should be discussed:
 - a. Days and time to work in classrooms/on campus
 - b. Procedures for you and staff member to be in communication
 - c. Alternate plans for the days when the teacher or staff member is absent
 - d. How you will be told of the day's assignment (folder, note, etc.)
 - e. What name the students will call you
 - f. Teachers' own classroom management
 - g. Where to leave your personal belongings
 - h. Where the lounge and adult restrooms are located.
8. Be punctual. In the event that you must be absent, please notify the teacher or staff member in the agreed upon manner as soon as possible.
9. Sign in and out upon your arrival and departure in the main office.
10. Wear your nametag or school badge throughout your stay on campus. This badge or nametag will help students; staff and other volunteers recognize that you are a volunteer on campus.
11. Remember that you are a role model for students and the school community.
12. Remember that a volunteer is not a teacher or a teacher's aide, not a therapist or a counselor, but first of all a friend who accepts the students as they are.

13. Feel free to ask questions about programs, policies, materials and supplies. Talk to the teacher about any difficulties at appropriate times, not in front of students or parents.
14. Learn the names of students.
15. Help students tackle their work but do not do their work for them. If they get off-track, help them get back on in a tactful manner.
16. Work at the student's level; sit or stand with him/her. Show your interest and involvement.
17. Speak in a positive manner to students; point out the things they have done right and the things they do well.
18. Remind students of appropriate behavior if they are disruptive. Remember though that corrective discipline is the responsibility of the teachers, counselors and school administrators.

School Volunteer Procedures/Checklist

Procedures for all volunteers are as follows:

- Fill out Volunteer Application Form (Appendix A)
- Read and sign Volunteer Agreement Form (Appendix B)
- Read and sign Volunteer Confidentiality Agreement (Appendix C)
- Provide evidence of a negative Mantoux TB test if required by your volunteer category (PLEASE NOTE: Volunteers who handle food are required to submit evidence annually.)
- Provide a valid state issued driver's license/ID Card or Social Security Card
- Agree and provide a Criminal Background check with Live-Scan if required by your volunteer category
- If a minor, must fill out Volunteer Application, Agreement Form, and Confidentiality Agreement **and** must provide evidence of a negative Mantoux TB test if required by your volunteer category

Comment [EB1]: Added for Minors
Volunteering on campus

Procedures for Returning Volunteers

Returning volunteers who have tested negative for tuberculosis must have on file with the school a certificate showing that within the last four years, the person has been examined and has been found to be free of communicable tuberculosis in accordance with Health and Safety Code Section 121545.

If you are volunteering for lunch, Tuberculosis (TB) Clearance must be renewed every year.

If you need to update your information, please fill out Appendix A.

Comment [EB2]: Added these two.

Appendix B: Guidelines and Agreement between Larchmont Schools and Volunteers

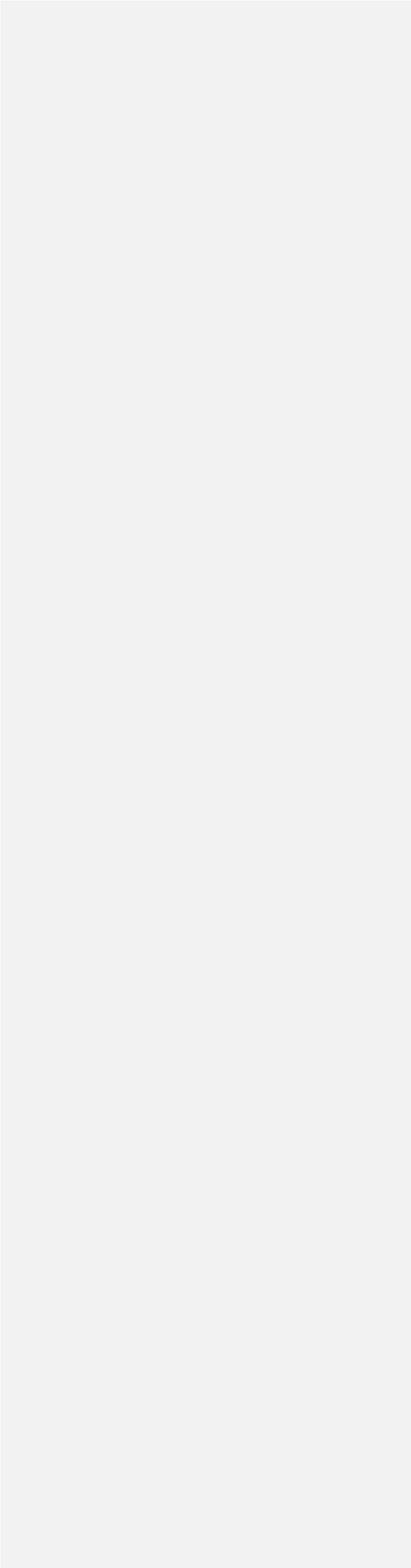
1. Immediately upon arrival, I will sign in at the main office or the designated sign-in station.
2. Volunteers will follow all policies, procedures and other rules established by the school and all applicable laws.
3. Volunteers must wear the appropriate identification badge or nametag and will show volunteer identification whenever required by the school to do so.
4. Volunteers must follow the appropriate dress code applicable to staff.
5. Volunteers cannot smoke in any school facility or building or within 50' of a school building.
6. Volunteers will not lend money, and/or bring gifts, to students unless authorized by the Head of School or designee.
7. Volunteers will not transport students unless they have been given express permission to do so in an emergency situation.
8. Volunteers will not put themselves in the position of being alone with any student.
9. Volunteers will not have access to student educational records. All volunteers will sign a confidentiality agreement.
10. Volunteers will not photograph or videotape students unless authorized by the Head of School or designee.
11. Volunteers will not dress, provide personal hygiene assistance, or supply medication to students.
12. Volunteers should not exchange telephone numbers, home addresses, e-mail addresses or any other home directory information with students for any purpose unless it is required as part of your role as a volunteer.
13. Volunteers will use universal precautions to avoid contact with bodily fluids.
14. Volunteers will use only adult designated restrooms.
15. Volunteers can monitor student behavior; however, if a situation is serious, the volunteer should seek immediate assistance from school personnel.
16. Volunteers will not discriminate against or harass any person and will report all harassment or discrimination observed, in accordance with school policy.
17. Volunteers will not search students or student property.
18. Volunteers will make every reasonable effort to make sure that the School's technology resources are used appropriately and responsibly according to the school's Acceptable Use Policy.

VOLUNTEER'S negligence or intentional acts in the performance of this Agreement, including but not limited to any claim due to injury and/or damage sustained by VOLUNTEER, and/or the VOLUNTEER'S younger dependents not yet enrolled in school.

- D. VOLUNTEER agrees to provide proof of negative tuberculosis test prior to service.
- E. VOLUNTEER agrees to comply with all Federal, State, Municipal and SCHOOL laws, rules and regulations that are now, or may in the future become applicable to VOLUNTEER.
- F. I understand that, in connection with my application as a volunteer, the SCHOOL will obtain information bearing upon my volunteer services, including Megan's Law information and public record information, documenting convictions, civil judicial actions, tax liens or outstanding judgments against me.

Volunteer Signature: _____ Date: _____

School Administrator Signature: _____ Date: _____



Appendix C: Confidentiality Agreement between Larchmont Schools and Volunteers

All school volunteers are expected to maintain confidentiality while working at the School. All things that are seen and heard at School about employees or children and their families should be considered privileged information. Trust must be established and maintained in order for our volunteer program to be successful.

It is understood and agreed to that volunteers in the School will be exposed to information that may be considered confidential. To ensure the protection of such information, all volunteers must agree to the following:

1. All personal and financial information regarding Larchmont Schools' parents and/or students is strictly confidential, and may not be disclosed to a third party unless specified by a school administrator.
2. Any information regarding the business operations of Larchmont Schools that is not public shall remain confidential.
3. Any information learned about Larchmont Schools' employees as a result of volunteering is strictly confidential, and may not be disclosed to a third party unless specified by the School administrator.

Volunteers can strengthen the bond between themselves and the School by following these guidelines:

- Treat all student and employee information as personal and confidential regardless of the source.
- Communicate relevant information about students to the respective classroom teacher or site administrator.
- Seek clarification of unusual situations that occur in the school from the person(s) involved and avoid discussing such matters with non-school personnel.
- Retain a sense of perspective regarding comments heard and actions observed.
- Understand that not all information can or will be shared with volunteers, due to legal considerations.
- Deal impartially with students regardless of background, intelligence, physical or emotional maturity.
- Do not discuss student progress or behavior with the parent. All relevant information should be referred to the teacher or Dean of Students. Direct all inquiries about students to the professional staff.
- Speak constructively of all School staff; however, report difficulties involving the welfare of students or the school to the Dean of Students or other school administrator.
- Do not discuss confidential information with anyone. This information includes, but is not limited to:
 - Scholastic and health records
 - Test scores and grades
 - Discipline and classroom behavior
 - Character traits of children
 - Supports and services a student may receive
- All volunteers are required to sign a statement of confidentiality.

Discipline: Discipline of students is solely the responsibility of the teacher in charge. Volunteers should under no circumstances discipline students. Should students misbehave in your presence, you should report this immediately to the teacher in charge. The teacher will then determine the necessary course of action. Also note that we expect students to treat volunteers with the same

level of respect given to other school personnel. If you feel that students are not being respectful towards you, do not hesitate to discuss the matter with the teacher or site administrator.

While all student information should be treated confidentially and sharing student information with others may be a violation of the law, do not make a promise to a student that you will keep confidential any information that pertains to the welfare of the student. Although the student is free to share confidential information with you, there are certain things you are required by law to tell the principal or school administrator. Any personal information learned from a student, should be held in strictest confidence **except:**

1. If a student confides that he or she is the victim of sexual, emotional, chemical or physical abuse.
2. If a student confides that he or she is involved in any illegal activity.
3. If a student confides that he or she is considering homicide or suicide.

Should one of these exceptions arise, you are required by law to immediately notify a School teacher or administrator. Remember, the information is extremely personal and capable of damaging lives, so do not share it with anyone (including other School staff members) except the school administrator or other appropriate authorities. If you have questions, please ask the Dean of Students or school administrator. Any student needs communicated to the volunteer should be referred to the appropriate staff person.

Volunteer Confidentiality Statement:

I, _____, understand that in the course of my association with Larchmont Charter School I am responsible for maintaining the confidentiality of all employee and student information (both written and verbal) that may become known to me during the course of my volunteer activities.

I further understand that in the performance of my volunteering, I am not to discuss academic or other confidential information regarding students or employees with anyone, including the parents of any student. Any breach of confidentiality will be carefully reviewed and if substantiated may result in termination of any and all volunteer involvement with the school and may be reported to the proper authorities.

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

Volunteer Signature: _____ Date: _____

School Administrator Signature: _____ Date: _____

Appendix D: Tuberculosis (TB) Clearance for Employees & Volunteers

PLEASE NOTE: In accordance with California Education Code Section 49406, all persons initially employed by a school district must be examined to determine if he/she is free of active TB not more than sixty (60) days prior to being hired. The examination must be an intradermal Mantoux tuberculin skin test, which if positive (10mm or more), must be followed by a chest x-ray. If you had a positive reaction to a prior skin test, indicate that date and proceed with a chest x-ray. A fine test is not acceptable.

The Genetic Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting, or requiring, genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information," as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Personal Information (Please Print)				
Last Name	First Name	MI	Social Security Number	
Home Address	City	State	Zip	Employee Number (if applicable)
Phone Number	Cell Number	Email	Birthday (mm/dd/yyyy)	
Position: <input type="checkbox"/> K-12 <input type="checkbox"/> Substitute <input type="checkbox"/> District Intern <input type="checkbox"/> Volunteer				

Mantoux Tuberculin Skin Test (5 TU PPD)	Chest X-ray (only if history of positive skin test)
Date Given	Date (or estimated year) of positive skin test
Date Read	Date X-ray Taken
Result (mm induration)	Impression
Signature of Practitioner	Signature of Physician
Date	Date
Printed Name of Practitioner	Printed Name of Physician
State License Number	State License Number
Degree	Degree
Medical Facility's Contact Information	
Address	City
	State
	Zip
	Phone Number

CANDIDATE MUST SUBMIT COMPLETED FORM TO: Network Support Office - Human Resources, 444 North Larchmont Boulevard, # 207, Los Angeles, CA 90004 323-380-7893

Appendix E: LiveScan Form



STATE OF CALIFORNIA
 BCA 8019A
 (orig. 04/2007; rev. 01/2011)

DEPARTMENT OF JUSTICE

REQUEST FOR LIVE SCAN SERVICE (Public Schools or Joint Powers Agencies)

[Print Form](#)

[Reset Form](#)

Applicant Submission

ORI: A7670 Type of Applicant: Classified School Employee Credentialed School Employee
Code assigned by DOJ

The following selections are for Public Schools only:

License, Certification, Permit Peace Officer Law Enforcement Officer Volunteer

Type of License/Certification/Permit OR Working Title: _____
(Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

<p><u>Larchmont Charter School</u> <small>Agency Authorized to Receive Criminal Record Information</small></p> <p><u>815 N El Centro Ave</u> <small>Street Address or P.O. Box</small></p> <p><u>Los Angeles</u> <u>CA</u> <u>90038</u> <small>City State ZIP Code</small></p>	<p><u>09623</u> <small>Mail Code (five-digit code assigned by DOJ)</small></p> <p><u>Jennifer Gonzalez</u> <small>Contact Name (mandatory for all school submissions)</small></p> <p><u>323-380-7893</u> <small>Contact Telephone Number</small></p>
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Applicant Information:

<p>Last Name _____ <small>Other Name (AKA or Alias) Last</small></p> <p>Date of Birth _____ Sex <input type="checkbox"/> Male <input type="checkbox"/> Female</p> <p>Height _____ Weight _____ Eye Color _____ Hair Color _____</p> <p>Place of Birth (State or Country) _____ Social Security Number _____</p> <p>Home Address _____ <small>Street Address or P.O. Box</small></p>	<p>First Name _____ Middle Initial _____ Suffix _____ <small>First Suffix</small></p> <p>Driver's License Number _____</p> <p>Billing Number _____ <small>(Agency Billing Number)</small></p> <p>Misc. Number _____ <small>(Other Identification Number)</small></p> <p>City _____ State _____ ZIP Code _____</p>
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Your Number: _____
(OCA Number (Agency Identifying Number))

Level of Service: DOJ FBI

If re-submission, list original ATI number:
 (Must provide proof of rejection) _____
Original ATI Number

Live Scan Transaction Completed By:

Name of Operator _____	Date _____
Transmitting Agency _____	ATI Number _____
LSID _____	Amount Collected/Billed _____

ORIGINAL - Live Scan Operator SECOND COPY - Applicant THRO COPY (if needed) - Requesting Agency