FAIRFIELD PUBLIC SCHOOLS Fairfield, Connecticut

1212AR Form

Volunteer/Resource Person Registration Form and Waiver of Liability

Only one form needs to be completed by a Volunteer/Resource Person each school year. Please print clearly in ink:

Registra	ion Form				
Name: _					
	Last	First	Middle	1	
Address:					
	Street		City	Zip Code	
E-mail ac	ldress:	Di	river's License:		
Emergency adult contact:			Phone:		
Are you	now or have you eve	er been a school volunt	eer/resource person? _		
At which	school?		Year?		
The name	of any child or war	rd attending this schoo	l:		
Criminal	Conviction Inform	nation			
Are you a	sex offender?				
		d of a felony?			
If you and	swered YES, list all	offenses -			
Offensels	·				
II request	ed, are you willing	to consent to a crimina	i background investig.	ation?	
	Important V	olunteer/Resource Pe	erson Policies and Gu	idelines	
		Persons must complete	e a new Volunteer/Res	ource Person	
	cation each year.	Darcone must sign in a	t the school office bef	ore proceeding to their	
	nteer/Resource Perso	•	t the school office ber	ore proceeding to their	
		sons may not dispense	either prescription or	over the counter	
	eations to students.	ons may not emptine	order property or	0	
4. Volui	nteers/Resource Pers	sons must respect a stu	dent's right to confide	ntiality including the	
follov	ving areas: standard	ized test scores, family	background informat	ion, reports of serious	
behav	ior patterns and wri	tten teacher observation	ons.		
Date:		Signature of Voluntee	er/Resource Person:		
		_	inteer/Resource Person		

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10/1/2008