

DOVER SCHOOL DISTRICT	POLICY CODE: IJOC --R
DATE OF ADOPTION: AUGUST 24, 2015	PAGE 1 OF 1

Dover School District-SAU #11

Volunteer Service Statement & Agreement

Date: _____, 20__

I make this Statement and Agreement in order to provide, and to be authorized to perform, uncompensated Volunteer and/or Chaperone services in the Dover School District:

In performing the specified volunteer service, I acknowledge:

- That I am 18 years of age or older and know of no reason, medical or otherwise, which would prevent me from performing the tasks required;
- That I have acquainted myself with what is required to perform those tasks, and represent that I have the skill and ability to perform them;
- That I assume full responsibility for my own safety and the safety of others who might be affected by my actions or omissions. I hereby agree to release, defend, indemnify, and hold harmless the Dover School District, its agents, employees, and officers, from any and all claims of illness, bodily injury, personal injury, or property damage, occurring to me or to others, arising from my negligent, reckless wanton, or intentional conduct while participating in this activity.
- That I will perform the volunteer service in compliance with the standards and specifications established, or approved, by the Dover School District, and will honor the direction of Dover School District officials to suspend or terminate service;
- That I agree to the foregoing in consideration for being permitted to perform volunteer service for and on behalf of the Dover School District.
- That I understand I will need to be fingerprinted at a future date if I have a break of one or more years in volunteering and/or chaperoning in the Dover School District.
- That I agree to maintain confidentiality of all students and staff.

Volunteer (Please Print Clearly)

Volunteer (Signature)

Address: _____

Telephone: _____

School: _____

This form is to be completed at the SAU Office Only.