

## EFWMS Volunteer Policy

Dear EFWMA/TOTMA Partner in Education:

We are excited that you are interested in volunteering at EFWMA/TOTMA! The work of individuals like you has helped make EFWMA/TOTMA so successful.

In order to maintain excellence, and for the protection of our students, EFWMA/TOTMA policy requires that all volunteers go through a background check process before volunteering. Please fill out the EFWMA/TOTMA Criminal History Record Check clearly and completely. Completed applications must be submitted to DPS and the process can take a minimum of two weeks from the time the completed form is submitted. There is a minimal fee of \$2.00.

Please complete all three pages of the EFWMA/TOTMA Criminal History Record Check form and submit the completed form to the front office.

Thank you and we look forward to your volunteering with us.

Volunteer Criminal History Check

In order to determine suitability for volunteering and/or mentoring in a school setting, I authorize East Fort Worth Montessori Academy (EFWMA) and The Olive Tree Montessori Academy (TOTMA), pursuant to Texas Education Code Section 22.0835, to obtain any criminal history record information. I understand this may include a search of local, state and/or federal law enforcement agency records, and hereby expressly release all information these agencies may provide. If there is a need for clarification of my identity, I agree to provide additional information, including but not limited to, photographs and fingerprints.

*PLEASE PRINT ALL INFORMATION LEGIBLY*

**This application must be completed at the beginning of each school year or if your name is legally changed.**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Present Address: \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip Code)

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Gender: Male Female

Ethnicity: American Indian/ Alaska Native  
Asian/Pacific Islander  
Black (Non-Hispanic)  
Hispanic  
White  
Other

Date of Birth: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Email Address:

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

As a volunteer, I agree to abide by the following code of conduct:

1. I will sign in at the computer in the front office and sign out when my duties are complete.
2. I will wear the printed name badge from the computer kiosk each time I visit.
3. I will dress and act in an appropriate manner at all times.
4. I will maintain confidentiality outside of school and will share with teachers and/or EFWMA/TOTMA administrators any concerns that I may have related to student welfare and/or safety.
5. Whenever possible I will abide by the "Three Person Rule". I understand that whenever possible a child is not to be left alone with an employee, volunteer, or other EFWMA/TOTMA representative unless a third party is present. Programs involving spending one-on-one time with a student will be done in a supervised setting.
6. I will not disclose, use, or disseminate student photographs or personal information regarding students to anyone.
7. I agree not to transport students. Volunteers are not authorized to transport students, staff or other volunteers unless given special authorization by EFWMA/TOTMA's administration.
8. I will not have contact with students outside of school hours.

Failure to uphold any guideline or standard may result in dismissal from the EFWMA/TOTMA Volunteer Program and may result in criminal prosecution.

Signature: \_\_\_\_\_

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