

WHISPERING HILLS PRIMARY SCHOOL

Volunteer Registration Form/Confidentiality Agreement

Whispering Hills Primary School values the contribution of parents and community members in supporting teaching and learning. As a volunteer, you provide much needed support to our school by working positively and cooperatively with the team. Thank you!!

Name: _____

Contact information (Mailing address and phone number):

Your child/ren: _____

By signing this form, I acknowledge the following conditions for volunteering:

- A volunteer must respect the privacy of students and staff. Any information about students or staff, personal or otherwise, learned through the course of volunteering is to remain confidential.
- A volunteer must hold any information collected, used, generated, or stored by Whispering Hills Primary School as strictly confidential.
- A volunteer must not disclose, communicate, publish, remove, copy, or destroy any documents unless specifically authorized to do so by a teacher, the principal or designate
- A volunteer must respect that the principal and teaching staff are responsible for student learning and behavior.
- In accordance with Freedom of Information and Protection of Privacy Act refrain from cell phone use eg. Taking photos, videos, etc.
- Refer any concerns you may have to administration.

Signature

Date

Admin Procedure 490: Volunteers: Classroom and co-Curricular

<https://docushare.aspenview.org/docushare/dsweb/Get/Document-219616/AP%20490%20Volunteers%20Classroom%20and%20Co%20curricular%20%20clean.pdf>

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