

TITLE: Establishing and Administering

School/Office Volunteer Programs

NUMBER: BUL-6746.0

ISSUER: Vivian Ekchian, Associate Superintendent

Office of the Associate Superintendent,

Support Services

Rosalinda Lugo, Ed.D., Administrator

Parent and Community Services

DATE: August 14, 2017

This policy provides guidance to school and District office administrators in

establishing and administering effective volunteer programs that support the Los Angeles Unified School District's (LAUSD) educational mission and meet LAUSD requirements. The administrator is charged with the responsibility of ensuring applicable volunteers meet all requirements and that the appropriate supervision of volunteers is provided at all times. The administrator has the authority to approve or

ROUTING

Principals

Local District Superintendents

Engagement Administrators

District Categorical Coordinators

School Administrative Assistants

School Categorical Coordinators

School English Learner Designees

Instructional Directors
Operations Administrators

Operations Coordinators
Parent and Community

deny any person from participation in a school or office volunteer program.

MAJOR CHANGES:

PURPOSE:

This Bulletin replaces BUL-6542.0, *Establishing and Administering School Volunteer Programs*, dated July 30, 2015, from the Parent, Community and Student Services. It outlines the supervision required from schools and District offices in order to ensure the health and welfare of all students and employees, while clarifying the definition of the requirements for volunteers. It also outlines the health requirements for volunteers in any early education program. The administrator may require all volunteers, at any time, to arrange for fingerprint clearance if deemed necessary.

This Bulletin directs volunteer coaches for high school athletics to be approved through LAUSD's Interscholastic Athletic Department.

This Bulletin clarifies that badges issued by photography companies, or any entity other than PCS, are not considered official, and are not to be used in lieu of a District-issued badge.



GUIDELINES: I. PURPOSE OF THE LAUSD SCHOOL VOLUNTEER PROGRAM

A. Purpose

The purpose of the LAUSD School Volunteer Program is to augment and enhance educational and support services to schools and offices by leveraging the rich talents and expertise of parents and members of the school community. School volunteers contribute to schools and District offices in the following ways:

- 1. Enriching the school experience for students and staff
- 2. Assisting teachers in classrooms
- 3. Assisting with student, staff, parent and community activities
- 4. Promoting partnerships between the school, the District, the home and community
- 5. Serving as positive role models for students
- 6. Supporting District programs and partnerships

B. Important Reminders

- 1. Volunteers must complete all steps of the District's Volunteer Application, Part A, online (see Attachment A). The school or District office must complete Part B online (see Attachment B). The administrator must approve each application and certify that all required forms are submitted by logging on to https://volunteerapp.lausd.net.
- 2. Volunteers for a single event, that takes place for the duration of one day only, do not need to submit the Volunteer Application but must complete the Single Event Form (Attachment C). In addition, they must be checked against the CA Megan's Law database online.
- 3. Volunteers do not receive compensation for services they provide and are not employees of the LAUSD.
- 4. Volunteers must meet certain health and safety requirements.
- 5. Volunteers are not permitted to bring children during their service hours.



- 6. Administrators must monitor the volunteer program to ensure that volunteers are appropriately assigned to duties and supervised by designated staff.
- 7. In schools, volunteers usually perform their duties under the *direct supervision* of a certificated staff member or under the *immediate supervision* of a non-certificated staff member.
- 8. In District offices, volunteers are assigned duties and supervised by the District office administrator.
- 9. The District Worker's Compensation Insurance covers only approved school and office volunteers injured during the course of a volunteer assignment.
- 10. All volunteers are expected to follow all District policies, including the LAUSD Code of Conduct with Students and the LAUSD Employee Code of Ethics.

II. THE ROLE OF THE ADMINISTRATOR OR ADMINISTRATIVE DESIGNEE

The school or office administrator shall assume general authority and responsibility over all volunteers serving at the school site or may designate an appropriate administrator to assume this task. The administrator may assign other certificated and/or classified staff to coordinate and support the volunteer program. The administrator or administrative designee must ensure the following:

- A. With the exception of active LAUSD employees, all volunteers must provide clearance of tuberculosis (TB) prior to starting volunteer service. For new volunteer applicants, TB test results are valid for up to 60 days prior to beginning of services. Clearance for TB is valid for a period of up to four (4) years for continuing volunteers.
- B. All volunteer applicants, including LAUSD employees and continuing volunteers, must be checked annually against the California Megan's Law database for sex offenders online.
- C. Health and safety clearances must be met and an application submitted for each volunteer.



- D. Each volunteer will receive a welcome letter and an active volunteer identification badge for the current school year issued by the Parent and Community Services (PCS), which must be returned to the school at the end of each day.
- E. Volunteers may not begin service until:
 - 1. All necessary clearances have been verified by the administrator or administrative designee;
 - 2. The volunteer has signed both a copy of Part A of the Volunteer Application and the Volunteer Commitment Form (Attachments D1 or D2); and
 - 3. A welcome letter and a volunteer identification badge, issued by PCS, have been received by the school.
- F. Volunteer duties have been assigned and are not in conflict with those of employees.
- G. Appropriate supervision of volunteers is provided at all times.
- H. A copy of each volunteer's Volunteer Commitment form, signed application, TB clearance and fingerprint clearance letter, if applicable, must be kept in a secure place at the school for five (5) years.
- Volunteer services are terminated by the administrator when necessary. The PCS volunteer program administrator must be informed in writing of such action.
- J. Continuing volunteers must reapply each year.

NOTE: The administrator may terminate a person's volunteer service when that person poses a danger or threat to the staff, students, and/or parents or when the volunteer violates the privacy of students or any other person on the school site. In addition, a volunteer may be terminated for failure to follow District policies regarding respectful treatment of others, discrimination or harassment policies, including the LAUSD Code of Conduct with Students or the LAUSD Employee Code of Ethics. This includes if the person has been issued a disruptive person letter. The administrator or administrative designee has the option to deny any



person on-campus volunteer service. Also, the administrator or administrative designee can determine when volunteer services are no longer needed.

III. HEALTH CLEARANCE REQUIREMENTS

A. Tuberculosis (TB) Clearance:

Volunteers must submit clearance of TB prior to starting volunteer service. Clearance of TB is valid at all LAUSD schools for a period of up to four (4) years as long as the volunteer is an approved volunteer. If the volunteer service ceases for one year, the volunteer will need a new TB clearance.

- 1. All new prospective volunteers are required to have a TB clearance provided by a licensed health care provider. Volunteers must submit one of the following:
 - a. A Certificate of Completion, HR Form 8478 (Attachment E), or other physician's form, completed and signed by a qualifying health care provider within 60 days prior to beginning volunteer service. Only one appropriate box is to be checked by the health care provider.
 - b. An Adult Tuberculosis Risk Assessment (Attachment F) administered by a health care provider verifying no TB risk factors.
 - c. Proof of a negative Mantoux skin test or Interferon-Gamma Release Assays (IGRA) blood test and the date results were obtained.
 - d. Results of a negative chest x-ray and the date it was read. Chest x-ray results will *only* be accepted with documented proof of a previous positive TB test.
- 2. The prospective volunteer must submit a copy of the TB clearance documentation to the administrator or designee.
- 3. A continuing volunteer's valid TB clearance date from the previous year that is on file with school must be re-entered on the online application for up to four (4) years.
- 4. Current LAUSD employees with current TB results on file, who want to participate in a volunteer program, are not required to submit a TB clearance form for volunteer service. However, the TB clearance date on file with LAUSD has to be entered on the online application.



B. Volunteers in Any Classrooms with Preschool Age Students

No one will be allowed to work or volunteer at a day care center or Early Education program location if he or she has not been immunized against pertussis, measles, and influenza. Only one dose of immunization for pertussis and measles given at any prior time is required. Each employee and volunteer shall receive yearly influenza vaccination between August 1 and December 1 of that year. The influenza vaccination is the only one that may be declined, but this must be accompanied with a declination letter (see Attachment G) written by the volunteer on an annual basis.

The Early Education programs include:

- 1. Expanded Transitional Kindergarten (ETK formerly SRLDP)
- 2. Expanded Transitional Kindergarten/Preschool Collaborative Classroom (ETK/PCC)
- 3. Early Education Centers (EEC)
- 4. California State Preschool Programs (CSPP)

C. TB Record Keeping

The TB clearance form must be kept on file at the school or District office for five (5) years along with a copy of the signed volunteer application and commitment form. For additional questions regarding TB requirements for LAUSD volunteer applicants, contact the PCS office at (213) 481-3350.

D. Locations that Provide TB Screening

Prospective volunteers may be able to obtain TB screenings from:

- 1. A private health care provider
- 2. The LAUSD Wellness Centers: http://thelatrust.org/wellness-centers/
- 3. The Los Angeles Department of Public Health: http://publichealth.lacounty.gov/tb/TBTesting.htm



IV. SAFETY/SECURITY CLEARANCE REQUIREMENTS

A. Megan's Law/Sex Offender Clearance

In accordance with District policy, the administrator or administrative designee must check all volunteer applicants, including LAUSD employee volunteers and continuing volunteers serving in schools and District offices, against the California Megan's Law database for sex offenders online at http://www.meganslaw.ca.gov/. The administrator or designee must check the Megan's Law database online annually at the time that the prospective volunteer applies.

Any volunteer applicant whose name appears on the Megan's Law database online is prohibited from serving as a District volunteer and as an oncampus school volunteer in any capacity for any length of time, including for one-time activities.

- B. Federal Bureau of Investigation (FBI) and Department of Justice (DOJ) Fingerprinting Clearance
 - 1. Volunteer applicants need to be fingerprinted only once during their volunteer service. However, if the volunteer ceases to volunteer for a period of two years or longer, a fingerprint clearance must be required again. District certificated and classified employees who separate from the LAUSD for more than 60 days and wish to volunteer must be fingerprinted. LAUSD adheres to the California State statutes pertaining to supervised volunteerism in public schools.
 - 2. Fingerprinting clearance by the FBI and the DOJ is required for the following persons:
 - a. Volunteers providing direct instruction to students, such as one-toone tutoring, reading in small groups, etc., regardless of the number of hours engaged in such activity, even if supervised by a certificated employee
 - b. Persons volunteering in any school or District office for more than 16 hours per week
 - c. All interns, including college students, regardless of the number of hours they will be volunteering per week



- d. Persons volunteering for less than 16 hours per week under immediate supervision and whose duties require significant contact with students, as determined by the administrator or administrative designee. Examples include, but are not limited to:
 - i. Breakfast in the Classroom (BIC) assistant
 - ii. Playground assistant
 - iii. Lunch supervision assistant
 - iv. Safety Valet Program assistant
 - v. The Village Movement program volunteer
 - vi. General individual or group support volunteer
 - vii. Volunteer reading to students in the classroom on a regular basis

At any time, the administrator or administrative designee may require all volunteers, with the exception of current District employees, to arrange for fingerprint clearance if deemed necessary.

The District requires employees to submit a TB clearance form and a Live Scan fingerprint clearance form before being hired. These also meet the requirements of the volunteer program.

Fingerprinting must be conducted through LAUSD. The Live Scan fingerprinting program conducted through LAUSD notifies the District if a volunteer has been arrested or a crime has been committed for any reason. Fingerprinting clearance will be emailed to the site administrator.

Fingerprinting for parent volunteers is available at the following approved locations:

1.	5607 Capistrano Ave.	Woodland	CA 91367	(818) 587-4300
		Hills		
2.	6505 Zelzah Ave.	Reseda	CA 91335	(818) 654-1600
3.	944 West 77th St.	Los Angeles	CA 90044	(323) 753-3321
4.	611 Jackson St.	Los Angeles	CA 90012	(213) 633-3500
5.	2060 West 156th St.	Gardena	CA 90249	(310) 515-3010
6.	312 N. Garey St.	Los Angeles	CA 90012	(213) 346-2160
7.	333 S. Beaudry Ave.,	Los Angeles	CA 90017	(213) 241-6140
	15th Floor			



School or District office personnel must call the requested location to schedule an appointment for the prospective volunteer.

Applicants are required to present a Social Security Number and a State of California Driver's License or Identification Card. When these documents are not available, alternate forms of legal documents may be accepted. When a Social Security Number is not available, a temporary Personal Identification Number (PIN) will be generated for the purpose of fingerprinting only.

The fingerprinting fee is currently \$56.00. Money orders or cashier's checks made out to LAUSD are the only accepted forms of payment. Neither LAUSD nor the school pays this cost. If available, funds provided by the Parent Teacher Association (PTA), Parent Teacher Student Organization (PTSO), a school's Booster Club and/or other donated funding may be used. The \$56.00 is required by the FBI and DOJ. The District does not charge any fee for processing.

V. APPLICATION PROCESS

NOTE: Volunteers for a single event, that takes place for the duration of one day only, do not need to submit a volunteer application but may complete the Single Event Form and be checked against the CA Megan's Law database online.

- A. Volunteer Application, Part A Submitted By Prospective Volunteer
 - 1. Any person interested in participating in a school's volunteer program, including continuing volunteers, LAUSD employees, community members and interns, must first check with the administrator or administrative designee to inquire about possible volunteer opportunities. Please refer to the Volunteer Application Instructions (Attachment H).
 - 2. Next, the prospective volunteer will register for a LAUSD Volunteer Parent/Guardian Account. If the prospective volunteer does not have an email account, see page 12. The prospective volunteer will do the following:
 - a. Access the LAUSD Volunteer Parent/Guardian Account registration page at https://volunteerapp.lausd.net.
 - b. Select "LAUSD parent/guardian" or "LAUSD community member."



- c. Click on "Register."
- d. Enter first and last name, a valid email account, and enter the number for security purposes.
- e. The prospective volunteer will receive an email to complete the registration process with instructions on how to create an account password.
- f. Follow the link provided in the email and create a password between 8 and 20 characters.
- 3. Once an account has been created, prospective volunteers will fill out Part A of the Volunteer Application. The Volunteer Application should be submitted electronically.
- 4. A copy of the Volunteer Application and a Volunteer Commitment Form must be printed, signed and delivered to the school or office administrator or administrative designee. The prospective volunteer should write down his or her Volunteer Identification (ID) Number for safekeeping.
- 5. In order to complete the process, the administrator or designee must complete Part B, and the administrator must certify and submit the application online.
- 6. Once Part B has been submitted, PCS will process the Volunteer Application and mail the official LAUSD volunteer badge to the school or office site.
- B. Volunteer Application, Part B Submitted by School or District Office

An administrator may delegate the task of approving volunteers to an approved designee by calling the PCS office at (213) 481-3350 where further instructions will be given.

The school or District office must complete and submit Part B of the application online. This step must be completed by the administrator or designee in order for the prospective volunteer to be processed by PCS. The following steps must be followed for Part B:

1. Click on "Administrator/Designee" at https://volunteerapp.lausd.net.



- 2. Enter LAUSD Single Sign On information.
- 3. Select a pending volunteer application by clicking on the "APPID".
- 4. Scroll down to the section marked, "Clearance Info". Verify that the volunteer has been checked through the California Megan's Law database for sex offenders online at http://www.meganslaw.ca.gov/.
- 5. In the next section, indicate how, when and where the volunteer will assist at the school site or District office.
- 6. Verify that all necessary documentation has been collected, including TB clearance and fingerprinting, when applicable.
- 7. The administrator must verify, by checking the box, that the application is complete. Submit the application.
- 8. Keep a signed copy of the volunteer's application along with the Volunteer Commitment Form and TB Clearance on file for 5 years.
- 9. Once the volunteer badge is received at the school or District office from PCS, contact the volunteer to begin assisting at the site.
- 10. Review the procedure for volunteer check in and check out as described in section D6, page 12.

C. Continuing Volunteers

Volunteers who wish to continue volunteering at a new or existing site must fill out a new application each year.

Designees may take advantage of the "Rollover" feature through the "Admin, Principal, Designee" portal on https://volunteerapp.lausd.net; however, all continuing volunteers must verify, in writing, that the prior year's information in Part A is still true and correct. For continuing volunteers, Part B of their new applications must be completed by the school or District office and approved online by the administrator. All records must be kept on file in a secure place for five (5) years. Upon approval in the system, a new volunteer identification badge will be issued by PCS.



D. Additional Guidelines

- 1. Additional information can be found in Definitions and Frequently Asked Questions section (Attachment I).
- 2. The District Worker's Compensation Insurance covers only approved school and office volunteers injured during the course of a volunteer assignment.
- 3. If a prospective volunteer does not have access to the necessary technology to register or complete the Volunteer Application online, the school or office may designate an employee to assist in filling out and submitting Part A of the application online on the person's behalf.

 Volunteers serving at more than one LAUSD school or office must have a completed application entered online, printed and signed for each school or District office within which he or she volunteers.
- 4. Approved staff (designees) for offices and schools to input application information include the following:
 - a. Assistant Principals
 - b. Title I, English Learner, and Targeted Student Population Coordinators
 - c. Categorical Programs Advisors
 - d. School Administrative Assistants
 - e. Community Representatives
 - f. Parent Resource Liaisons
 - g. Parent Resource Assistants
- 5. Part A of the Volunteer Application, printed and signed, must be kept on file at the school for five (5) years.
- 6. School volunteers are required to sign in at the school office upon entering the campus and picking up their volunteer badge. School volunteers are to sign out when they exit the campus. Schools must require volunteers to leave their volunteer identification badges at the school at the end of the day. Volunteer badges provided by the school or school photograph companies are not the official badges provided by the PCS office.
- 7. Once a person receives a volunteer identification badge, the person is approved to provide service as a volunteer at the designated school or



office until the end of the school year in which the badge was issued. Continuing volunteers are welcome to reapply for the next school year but must receive a new badge from PCS prior to providing volunteer service.

E. Other Types of Volunteers

NOTE: Parents/guardians observing in classrooms or attending other school activities are not considered volunteers; nevertheless, they must always be under immediate supervision in the classroom and during other activities.

1. Parent/Guardian

All parents/guardians fall under the requirements of this Bulletin and have the right to volunteer for their children's schools. Parents/guardians who are not allowed on campus, or who are unable to travel to campus, should be assigned duties that they are able to perform from their homes. An off-campus volunteer must fill out the Volunteer Application. The school administrator determines which health and safety requirements the off-campus volunteer must fulfill.

2. Community Members

Community members and employees of community-based organizations and agencies, as well as business representatives, must follow the same application and clearance processes that parents/guardians follow.

3. High School Students

Currently enrolled 10th through 12th grade high school students may volunteer with permission of the parent and the selected administrator or designee (Attachment J). Student volunteers must be supervised at all times.

4. LAUSD Active Employees

District employees must complete Part A of the Volunteer Application and be checked against the Megan's Law database online.

The District requires employees to submit a TB clearance form and a Live Scan fingerprint clearance form before being hired. These meet the requirements of the volunteer program.



5. Interns/Unpaid Interns

Unpaid interns associated with accredited university programs are required to complete the Volunteer Application and health and safety screening process. All interns completing their time in schools or in locations having contact with students, regardless of the number of hours per week, are to be processed as volunteers and must be fingerprinted and cleared through the DOJ and FBI.

6. Safety Valet Program

Individuals volunteering for the Safety Valet Program are required to fill out the Volunteer Application and meet the required health and safety screenings. School administrators will decide if fingerprinting is required. The Safety Valet Program is implemented by the LAUSD Office of Environmental Health and Safety (OEHS). Volunteers in the Safety Valet Program receive additional training from the LAUSD's Los Angeles School Police Department Motor Unit. For more information on the Safety Valet Program, please contact the LAUSD Office of Environmental Health and Safety at (213) 241-3199.

7. Volunteer Athletic Coaches

Individuals who are interested in applying to volunteer at a high school as an athletic coach need to contact the school's Athletic Director or administrative designee in charge of athletics. Athletic volunteer applications are processed through the LAUSD's Interscholastic Athletic Department which certifies that volunteers have met all requirements. For more information on volunteering as an athletic coach, please contact the Interscholastic Athletic Department at 213-241-5847.



AUTHORITY: This is a policy of Los Angeles Unified School District.

RELATED RESOURCES: REF- 2111.0, Field Trips Handbook and Revised Procedures, dated

July 24, 2006

BUL-3872.0, Fingerprinting and Criminal Background Compliance

for Contractors, dated August 7, 2007

BUL-6492.0, Visitors to School Campuses and Locked Campuses

During School Hours, dated April 22, 2015

BUL-3422.0, Sex Offender Notification, dated February 21, 2007 REF-5496.1, Implementing a Safety Valet Program at Schools,

dated June 24, 2011

AB 1667, Williams. Tuberculosis testing in schools

Education Code §35160, §49406 (f), §35021.1-3, and §45349

ASSISTANCE: For assistance or further information, contact the Local District

Parent and Community Engagement office as indicated below.

 Local District Northwest:
 (818) 654-3600

 Local District Northeast:
 (818) 252-5400

 Local District South:
 (310) 354-3400

 Local District East:
 (323) 224-3100

 Local District West:
 (310) 914-2100

 Local District Central:
 (213) 241-0100

ATTACHMENTS:

Attachment A: Volunteer Application, Part A
Attachment B: Volunteer Application, Part B
Attachment C: Single Event Application

Attachment D1: Volunteer Commitment Form (English)
Attachment D2: Volunteer Commitment Form (Spanish)
Attachment E: Certificate of Completion, HR Form 8478
Attachment F: Adult Tuberculosis Risk Assessment

Attachment G: Influenza Vaccine Declination
Attachment H: Volunteer Application Instructions

Attachment I: Definitions and Frequently Asked Questions

Attachment J: Student Volunteer Permission Form



ATTACHMENT A

Los Angeles Unified School District Volunteer Application, PART A

This application must be printed, signed and delivered to the District office administrator or principal of the school where you want to volunteer. The office or school can assist you with printing the application.

PARI A: To be completed by applica	ant				
[] New Volunteer	You will be identif	ied by your birt	hdate and Voluntee	r Identification (ID)	Number.
[] Returning Volunteer	Birthdate:		Volunteer ID Num	nber:	
If continuing, please list the office(s)	or school(s) where	you have volui	nteered:		
PROFILE INFORMATION					
First Name:		Middle Nan	ne/Initial:		
Last Name:		Other Nam	es:		
TYPES OF VOLUNTEERS: (Pleas	e check all tha	t apply)			
I am a: [] parent/legal guardian of I am a: [] community member or r [] other					
I am: [] employed by LAUSD.	Emplo	oyee number:			
I am: [] a student at a college or u	niversity. Name	of institution:			
I am: [] an intern.		of institution:			
I am: [] employed at a community organization.		e of organizatio	n:		
I am: [] volunteering in a LAUSD o	ffice. Name	of unit/office:			
CONTACT INFORMATION					
Address:					
City:		te:		Zip:	
			Wo		
Email:					
Emergency Contact 1 Name:			Contact 1 Phone:		
Emergency Contact 2 Name:		_	Contact 2 Phone:		
EMPLOYMENT (OPTIONAL)					
Are you employed? [] yes [] no I	f so, where		Occupation:		
Relevant Skills (optional):					
Do you need any health accommoda	tions? (optional) _				

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August 14, 2017



ATTACHMENT A

DEMOGRAPHIC	C DATA (optional)			
Ethnicity: Gender: Languages Spoker Level of Education	[]Asian Indian []Cam []Vietnamese []Othe []Hawaiian []Caucasi []Male []Female : []English []Spanish [bodian []Filipino r Pacific Islander [an/White	[]Hmong []Japane]Guamanian []Chin	can Native []Asian []Tahitian cse []Korean []Laotian cse []Other Asian []Samoan cse (specify)
	· NTEER PLACEMENT IN	FORMATION		_
Name of the school	ol or office at which I want	to volunteer:		
(You must fill out a s	eparate application for every	school or office where	you want to volunteer.)	
	ending this school. student(s) and birthdate(s)		yes [] no	
[] Mornings [[] Monday [er during the following day] Afternoons [] Evening] Tuesday [] Wednesday r of hours I can serve each	s []Thursday[]F	-riday [] Saturday	
(Note: If you volunte	eer more than 16 hours per we	eek, you MUST be fing	erprinted.)	
Have you ever be	en convicted of a crime invlain:	volving children? [] yes [] no	
I would like to vo	lunteer in the following are	eas:		
[] Classroom [] Parking Valet [] Off campus	[] Library [] After school [] Other (specify)	[] Cafeteria	[] Supervision [] Intern	[] Breakfast in the Classroom [] Mentor/Tutor
,	nalty of perjury under the unteer's Signature	laws of the State of	California that the for	regoing is true and correct.



ATTACHMENT B

Los Angeles Unified School District Volunteer Application, PART B

PART B: To be completed by school or office personnel

Date of TB skin test:	Date of CA Megan's Law review:
Date of X-ray:	Fingerprinting needed? [] no [] yes
Doctor's clearance:	Date of fingerprint clearance:
SCHOOL OR OFFICE PROFILE	
Name of School or	
Office:	School Year:
Volunteer assigned to:	Number of hours assigned:
Type of supervision: [] immediate sup	pervision [] certificated supervision [] off-campus non-student only
Administrative Designee:	
First Name:	Last Name:
Principal or District Office Administrato [] I certify that I have reviewed this	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer.
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (<i>Please identi</i>)	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer.
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Grant of the season:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below
Principal or District Office Administrato [] I certify that I have reviewed thi [] Application denied. (Please identication of the person letter on form the person in	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or: Last Name:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or: Last Name:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or: Last Name:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or: Last Name:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or: Last Name:
Principal or District Office Administrato I certify that I have reviewed thi Application denied. (Please identication) Reason: Principal or District Office Administrator First Name: Employee Number:	Classroom/Office: or Verification: is application, the attached clearances, and approved this volunteer. ify reason below.) file [] felony conviction [] other: see below or: Last Name:



This application need not be entered in the Volunteer Management System online.

This form excludes overnight events. Volunteers for overnight events must complete the application online and be fingerprinted.

SINGLE EVENT VOLUNTEER APPLICATION



This application is not to be used for reoccurring events.

SCHOOL NAME: _____

First Name	Last Name		Birthdate
Home Phone Number			Cell Number
Email Address			
Address	City	State	Zip Code
Type of Event		Date of Eve	ent
Name of Person to Contact in Case o	f Emergency/Relationship	Person's Ph	none Number
Relationship to Student			
If you would like to serve as a regular	volunteer, please complete th	ne Volunteer App	olication online at
Relationship to Student If you would like to serve as a regular https://volunteerapp.lausd.net. Please read the following agreement		ne Volunteer App	olication online at
If you would like to serve as a regular https://volunteerapp.lausd.net.	and sign below: es Unified School District's curr entifying a student should not t	ent policies rega o be disclosed w	rding volunteers. An ithout proper the
If you would like to serve as a regular https://volunteerapp.lausd.net. Please read the following agreement I agree to comply with the Los Angeloand all information concerning or ide	and sign below: es Unified School District's curr entifying a student should not t	ent policies rega o be disclosed w	rding volunteers. And ithout proper the
If you would like to serve as a regular https://volunteerapp.lausd.net. Please read the following agreement I agree to comply with the Los Angele and all information concerning or ide administrator's authorization. Photog	and sign below: es Unified School District's curr entifying a student should not t	ent policies rega o be disclosed w I for any purpose	rding volunteers. And ithout proper the second
If you would like to serve as a regular https://volunteerapp.lausd.net. Please read the following agreement I agree to comply with the Los Angele and all information concerning or ide administrator's authorization. Photog	and sign below: es Unified School District's currentifying a student should not tographing students is prohibited not write below this line. Staff	rent policies rega to be disclosed w I for any purpose use only.	rding volunteers. Any ithout proper the e. Date
If you would like to serve as a regular https://volunteerapp.lausd.net. Please read the following agreement I agree to comply with the Los Angele and all information concerning or ide administrator's authorization. Photog	and sign below: es Unified School District's currentifying a student should not tographing students is prohibited not write below this line. Staff	rent policies rega to be disclosed w I for any purpose use only.	rding volunteers. And ithout proper the second

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ATTACHMENT D1

Print First and Last Name	School or Office Name

VOLUNTEER COMMITMENT FORM

I agree to abide by the following:

- 1. I will sign in at the main office upon arrival and sign out when I leave for the day.
- 2. I will follow the assignment schedule given to me by the principal or designee.
- 3. I will use words and phrases that are appropriate and be a good role model for students.
- 4. I will wear my volunteer identification badge at all times while participating in volunteer activities.
- 5. Except in the case of an emergency, I will give 24-hour notice when I cannot keep a scheduled assignment.
- 6. I will follow the dress code of the school or office.
- 7. I will follow the District's Code of Conduct with Students and the District's Employee Code of Ethics.
- 8. I will only use the adult bathroom facilities.
- 9. I will never be alone with individual students.
- 10. I will not contact students outside of school hours, or exchange contact information.
- 11. If I have reason to suspect child abuse, I will notify the principal or designee immediately and confidentially.
- 12. I will treat all students, families, and employees with respect regardless of their race, gender, class, religion, sexual orientation, gender identity, disability, or immigration status.
- 13. I will treat all children and persons equally and with respect.
- 14. I will not share confidential information with anyone inside or outside of the school or office without the permission of the principal or other administrator.
- 15. I will report children's behavior problems to the teacher or other supervising school personnel.
- 16. I will respect the authority of all school and office personnel.
- 17. I will learn the rules regarding drills and emergencies and follow the direction of District office or school staff.
- 18. I will not use school property or equipment without the authority of the administrator or designee and I will not use school property or equipment for personal gain.

Volunteer's Signature	Date	
Administrator or Designee's Signature	 Date	



ATTACHMENT D2

FORMULARIO DE COMPROMISO COMO VOLUNTARIO

	Nombre y apellido	Nombre de la escuela u oficina
Me d	comprometo a obedecer lo siguiente:	
1.	Me registraré en la oficina principal inm	nediatamente al llegar y salir.
2.	Seguiré mi programación de asignacion	es dadas por el director escolar o persona asignada.
3.	Hablaré usando palabras y frases que se ejemplo a seguir para los estudiantes.	ean apropiadas y beneficiosas consistentes como un
4.	Llevaré a la vista mi tarjeta de identifica participando en actividades como volur	ación de voluntario en todo momento mientras esté ntario.
5.	anticipación cuando no pueda asistir a r	
6.	Seguiré las normas de vestimenta de la	
7.	Obedeceré el Código del Distrito para la empleados del Distrito.	a conducta con los estudiantes y el Código ético para
8.	Usaré solamente los sanitarios designad	
9.	Nunca me quedaré a solas con un estuc	
10.	No me comunicaré con los estudiantes información de contacto.	fuera de los horarios escolares o intercambiaré
11.	Si tengo motivos para sospechar abuso confidencialmente al director escolar o	infantil, se lo reportaré inmediatamente y persona designada.
12.		mpleados con respeto sin importar su raza, género, ual, identidad de género, discapacidad o estado
13.	Trataré a todos los niños y personas de	manera imparcial y con respeto.
14.	No compartiré información confidencia la autorización por escrito del director u	l con nadie dentro o fuera de la escuela u oficina sin u otro administrador.
15.	Reportaré problemas de conducta estud	diantil al maestro u otro empleado escolar de supervisión.
16.	Respetaré la autoridad de todo el perso	onal escolar y del personal de la oficina.
17.	Aprenderé las reglas acerca de los simu instrucciones del personal de la oficina	lacros y para las emergencias y seguiré las del Distrito o escolar.
18.	•	sin la autorización del administrador o persona
Firm	a del Voluntario	Fecha
Firm	a del Director o Persona Designada	Fecha



ATTACHMENT E



LOS ANGELES UNIFIED SCHOOL DISTRICT

HUMAN RESOURCES DIVISION - EMPLOYEE HEALTH SERVICES
TB COMPLIANCE PROGRAM

0 110 4 N		9.4.11
Social Security No:	or Employee No: Ema	il Address:
TUBERC	ULOSIS CERTIFICATE OI	COMPLETION
Check One:		
☐ The patient does not h	nave TB risk factors per the <u>ADULT TUBERCULOSIS R</u>	ISK ASSESSMENT.
	sk factors, but had a negative skin or blood test onate of test must be within 60 days prior to date of hire.	(date).
APPLICANTS: Da	positive skin or blood test and a negative chest X-R ate of x-ray must be within six months prior to date of heat have risk factors, or if risk factors were identified as tuberculosis.	ire.
APPLICANTS: Da The above named patient does no	ate of x-ray must be within six months prior to date of hat have risk factors, or if risk factors were identified as tuberculosis.	ire.
APPLICANTS: Date of the above named patient does not determined to be free of infection.	ate of x-ray must be within six months prior to date of hat have risk factors, or if risk factors were identified as tuberculosis.	the patient has been examined and
APPLICANTS: Da The above named patient does no determined to be free of infectiou. Health Care Provider Signature (MD, DO, PA	ate of x-ray must be within six months prior to date of he have risk factors, or if risk factors were identified as tuberculosis.	the patient has been examined and Date
APPLICANTS: Da The above named patient does no determined to be free of infectiou. Health Care Provider Signature (MD, DO, PA Print Health Care Provider's Name	ate of x-ray must be within six months prior to date of heat have risk factors, or if risk factors were identified as tuberculosis. NP, RN ONLY) Title	the patient has been examined and Date License No.
APPLICANTS: Da The above named patient does no determined to be free of infectiou. Health Care Provider Signature (MD, DO, PA Print Health Care Provider's Name Address:	ate of x-ray must be within six months prior to date of heat have risk factors, or if risk factors were identified as tuberculosis. NP, RN ONLY) Title City	the patient has been examined and Date License No.

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August 14, 2017







Date of Risk Assessment:

Adult Tuberculosis (TB) Risk Assessment Questionnaire¹

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555)

To be administered by a licensed health care provider (physician, physician assistant, nurse practitioner, registered nurse)

Da	ate of Birth:				
lfγ	History of positive TB test or TB disease Yes No No If yes, a symptom review and chest x-ray (if none performed in previous 6 months) should be performed at initial hire.* If no, continue with questions below.				
If there is a "Yes" response to any of the questions 1-5 below, then a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) should be performed. A positive test should be followed by a chest x-ray, and if normal, treatment for TB infection considered.					
Ris	sk Factors				
1.	One or more signs and symptoms of TB (prolonged cough, coughing up blood, fever, night sweats, weight loss, excessive fatigue) Note: A chest x-ray and/or sputum examination may be necessary to rule out infectious TB. ²	Yes No No			
2.	Close contact with someone with infectious TB disease	Yes No			
3.	Birth in high TB-prevalence country** (**Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes No			
4.	Travel to high TB-prevalence country** for more than 1 month (**Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes No			
5.	Current or former residence or work in a correctional facility, long-term care facility, hospital, or homeless shelter	Yes No			

TCB-01 (12/14) Effective January 1, 2015

Do Not Submit Adult Tuberculosis (TB) Risk Assessment Questionnaire to LAUSD Page 23 of 28 Augu

^{*}Once a person has a documented positive test for TB infection that has been followed by an x-ray that was deemed free of infectious TB, the TB risk assessment is no longer required.

¹ Adapted from a form developed by Minnesota Department of Health TB Prevention and Control Program and Centers for Disease Control and Prevention.

² Centers for Disease Control and Prevention (CDC). *Latent Tuberculosis Infection: A Guide for Primary Health Care Providers*. 2013. (http://www.cdc.gov/tb/publications/LTBI/default.htm)



ATTACHMENT G

Influenza Vaccine Declination

Senate Bill (SB) 792

Commencing September 1, 2016, SB 792 would prohibit a person from being employed or volunteering at a day care center if he or she has not been immunized against influenza, pertussis, and measles. Each employee and volunteer shall receive an influenza vaccination between August 1 and December 1 of each year. A person is exempt from the requirements of this section only under any of the following circumstances: The person submits a written declaration that he or she has declined the influenza vaccination. This exemption applies only to the influenza vaccine.

I acknowledge that I am aware of the following facts:

- ✓ Influenza is a serious respiratory disease that kills thousands of people in the United States each year.
- ✓ Influenza vaccination is recommended for me and all other healthcare workers to protect this facility's patients from influenza, its complications, and death.
- ✓ If I contract influenza, I can shed the virus for 24 hours before influenza symptoms appear. My shedding the virus can spread influenza to patients in this facility.
- ✓ If I become infected with influenza, even if my symptoms are mild or non-existent, I can spread it to others and they can become seriously ill.
- ✓ I understand that the strains of virus that cause influenza infection change almost every year and, even if they don't change, my immunity declines overtime. This is why vaccination against influenza is recommended each year.
- ✓ I understand that I cannot get influenza from the influenza vaccine.
- ✓ The consequences of my refusing to be vaccinated could have life-threatening
 consequences to my health and the health of those with whom I have contact,
 including:
 - · my coworkers
 - my family
 - · my community

Despite these facts, I am choosing to decline reasons:	the influenza vaccination right now for the following
I understand that I can change my mind at any t vaccine is still available.	ime and accept the influenza vaccination, if
********	*******
I have read and fully understand the informati	ion on this declination form.
Signature:	Date:
PrintName:	



ATTACHMENT H

PART A INSTRUCTIONS FOR LAUSD VOLUNTEER APPLICATION

NEW VOLUNTEERS

If you are interested in becoming a volunteer you will need to complete the following steps:

- 1. Ask the school administrator or District office administrator if there are any volunteer opportunities available.
- 2. Obtain TB clearance from your healthcare provider after you have been informed of available volunteering opportunities.
- Register and fill out Part A of the online application at http://volunteerapp.lausd.net
 Write down your Volunteer Identification (ID) Number for safekeeping.
- 4. Notify the administrator or designee that you have filled out the application and are interested in becoming a volunteer.
- 5. If the administrator determines it is necessary, obtain fingerprint clearance. Ask school personnel to call to schedule an appointment per the Volunteer Bulletin. The fee is \$56.00 and, in some cases, may be covered through PTA/PTSO funds. Fingerprinting can only be paid for by money orders or cashier's checks made out to *LAUSD*.
- 6. The administrator or designee will check your name against the Megan's Law online database. Once the administrator or designee has approved your application, it will be forwarded to Parent and Community Services for processing. On approval, a volunteer identification badge will be issued and sent to the school or District office and you may begin your volunteer assignment.

CONTINUING VOLUNTEERS

If you would like to return to a school or office in the following school year and continue as a volunteer, or apply to an additional school or office, you will need to complete the following steps:

- 1. Ask the school administrator or District office administrator if there are any volunteer opportunities available.
- 2. Log in and fill out Part A of the online application at http://volunteerapp.lausd.net.
- Notify the administrator or designee at the school or office where you have applied that you have filled out the application and obtained your TB clearance.
- 4. District staff must verify TB clearance prior to starting volunteer service. Clearance for TB is valid for a period of up to four (4) years.
- 5. Check with the school or office with which you are applying if you will need to be fingerprinted. If you have been fingerprinted through the District in the past, you may not need to be fingerprinted again. If you must be fingerprinted, ask school personnel to call to schedule an appointment per the Volunteer Bulletin. The fee is \$56.00 and, in some cases, may be covered through PTA/PTSO funds. Fingerprinting can only be paid for by money orders or cashier's checks made out to *LAUSD*.
- 6. The administrator or designee will check your name against the Megan's Law online database. Once the administrator or designee has approved your application, it will be forwarded to Parent and Community Services for processing. On approval, a volunteer identification badge will be issued and sent to the school or District office, and you may begin your volunteer assignment.



ATTACHMENT I

DEFINITIONS AND FREQUENTLY ASKED QUESTIONS

Terms Definitions

Direct instruction: A volunteer who is working directly with students such as providing one-to-one

tutoring, reading in small groups, etc.

Immediate supervision: Refers to level of supervision where certificated personnel needs to be in

volunteer's immediate area or within eyesight of the volunteer. This includes, but is not limited to, volunteers who work with an independent group while teacher is in

the same classroom or yard supervision.

Certificated staff: Staff person who is a teacher, administrator, librarian, etc.

Classified staff: A person who is a full-time employee and is not a certificated employee

Unclassified staff: A person who is not employed full time and does not receive health benefits

Single (one-time) event: An event that takes place for the duration of one day only. One application needs

to be completed per school year. If applicants wish to volunteer more than once,

they must complete the Volunteer Application.

Frequently Asked Questions

- Q: I am an intern and I only volunteer for 2 hours a day. Do I need to be fingerprinted?
- A: All interns, including college students, must be fingerprinted by the LAUSD regardless of the number of hours they will be volunteering per week.
- Q: I want to support my school by being a volunteer, but I have a 2 year old child. Can I bring my child when I am volunteering?
- A: Volunteers are not permitted to bring children during their volunteer hours. School principals and District office administrators must monitor the volunteer program to ensure that volunteers are appropriately assigned to duties and supervised by designated staff. However, any exception must be approved by the administrator or designee.
- Q. I want to volunteer 21 hours per week at my child's school, but I cannot afford the \$56.00 to be fingerprinted. Can the school use its categorical or general funds to pay the fee for me?
- A: Neither LAUSD nor the school pays this cost. If available, funds provided by the Parent Teacher Association (PTA), Parent Teacher Student Organization (PTSO), a school's Booster Club and/or other donated funding may be used.



ATTACHMENT I (Continued)

- Q: If my name appears on the Megan Law database, can I still volunteer at my child's school?
- A: Any volunteer applicant whose name appears on the Megan's Law online database is prohibited from serving as a District office volunteer and as an on-campus school volunteer in any capacity for any length of time, including for one-time activities (page 5). However a parent volunteer may provide volunteer service from their residence, which may include cutting, sorting, or alphabetizing paper for a teacher, etc.
- Q: Do I have to get a shot for the TB Screening?
- A: No. There are three ways to obtain TB clearance. You can complete the Risk Assessment
 Questionnaire; however, if you answer yes to any of the questions, this questionnaire cannot be used
 as clearance for you. Another way consists of getting a chest X-ray, which will be offered to you if, in
 the past, you have had a positive skin test result. Finally, you may get an injection to test for TB.
- Q: I am a LAUSD employee. Where can I find my TB Clearance information?
- A: Your employee TB Clearance information can be found using the Employee Self Service tool: https://ess.lausd.net/



ATTACHMENT J



Los Angeles Unified School Volunteer Program STUDENT VOLUNTEER PERMISSION FORM

Student Information	
Name:First	Last
Birthdate:	
Los Angeles Unified School of Attendance	Local District
Circle current grade: 10 11 12	
Parent/Guardian Contact Name:	
First	Last
Contact Phone Number Email Address	
I give my permission for my daughter/son,(insert	student name)
to volunteer at (insert school name)	·
I understand, as does my child, that my child is expecte LAUSD Parent Student Handbook. Failure to do so will r volunteering assignment, as well as disciplinary action a	result in my child's prompt removal from the
Student signature:	Date:
Parent signature:	Date:
Please return this completed form and your signed voluor the main office.	unteer application to the school volunteer coordinator

(Note: A separate application online is required for each school or District office volunteer assignment.)