



The Cardiff School District values the thousands of hours of service provided by school volunteers each year. To provide for student safety and well-being, volunteers are required to have the following documents on file in the school office:

- ◆ Negative TB Test Results (good for four years)
- ◆ Proof of COVID-19 Vaccination
- ◆ Signed Volunteer Clearance (see below)

All volunteers are asked to sign-in at the school office and wear a school volunteer badge during each volunteer session. Volunteers must also wear a mask when around children; masks are optional outdoors when distancing can be maintained.

Thank you for serving as a volunteer in the Cardiff School District. By giving your time and talent, you are making a difference in the lives of our children.

VOLUNTEER DOCUMENT REQUIREMENTS

_____ I understand that I must have a current negative TB Test Result Form (completed by physician or clinic) on file in the school office. Should there be a change in my health, I will inform the office and cease volunteering. ***(Please initial)***

_____ I understand that I must be fully vaccinated against COVID-19 and must provide a copy of my vaccination documentation before I may volunteer on campus. ***(Please initial)***

_____ I understand that I may be working directly with students. I understand that confidentiality must be maintained with regard to student academic, social and emotional needs. ***(Please initial)***

_____ I have read and understand the COVID-19 District Protocols. ***(Please initial)***

VOLUNTEER CLEARANCE EDUCATION CODE SECTION 35021

I, _____, am a volunteer with the Cardiff School District. I am not a person required to register as a sex offender pursuant to Section 290 of the Penal Code. I declare under penalty of perjury that I am aware of the amended Education Code Section 35021 and its application, and that I am not a registered sex offender nor am I required to register as a sex offender. ***(Please sign)***

Student Name(s) _____

School Site _____

Volunteer Signature _____

Date _____

Address _____

Phone Number _____