



**GISD Volunteer / Mentor Packet 2019-2020**

Name \_\_\_\_\_ Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

\_\_\_\_\_ General Volunteers

\_\_\_\_\_ Mentor (one-to-one)

**Place an X by the program that best fits your schedule**

\_\_\_\_\_ **Classroom Volunteer**

- Volunteer is assigned to a specific classroom teacher to assist/tutor in the classroom. Grade preferred: \_\_\_\_\_

\_\_\_\_\_ **PE, ART, Music Volunteer**

- Preference: \_\_\_\_\_

\_\_\_\_\_ **Office Volunteer**

- File papers, copy papers, count class sets of handouts, deliver notes, help prepare teacher materials, etc.

\_\_\_\_\_ **Cafeteria Volunteer**

- Help open containers, pass out silverware, help monitor

\_\_\_\_\_ **Library Volunteer**

- Shelf books, keep library organized, check out books with scanner, read to students, etc.

\_\_\_\_\_ **Mentor Volunteer**

- Will meet with their assigned student in the cafeteria during the student's 30 minute lunchtime. The role requires a strong commitment 30 minutes per mentor student on a regular basis.

**Confidentiality Agreement**

I agree to use good judgment about confidential matters heard or observed while on a campus. I will speak positively about my experiences while on a campus. If I become concerned about anything said or observed, I will notify a campus administrator or counselor as soon as possible.

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

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

### **Procedures for Volunteers and Mentor Participants**

1. Complete and return it to the school office:
  - First two pages of this packet
  - GISD Criminal History Record Information Addendum
  - DPS Computerized Criminal History (CCH) Verification
2. Upon arrival to a GISD campus, **volunteers** and **mentors** will present driver's license to front office receptionist and receive a visitor's badge to wear while on campus. Before leaving campus, stop by the office and return the visitor's badge.
3. **Volunteers** will report to their assigned classroom or designated work area where they will be given instructions. Volunteers may be asked to help students to learn their math facts, read to students or listen to students read.
4. **Mentors** will report to the cafeteria to meet their assigned student.
5. **Mentors** should check in with teachers on duty in the cafeteria to let them know who they are and why they are there.

### **Volunteer & Mentor Assignments**

- Be assigned to a designated student through the campus counselor
- Serve as a positive role model for student(s)
- Encourage student's academic success
- Help their student develop social skills and encourage good manners
- Strengthen self esteem and leadership skills in mentor student
- Eat and visit with assigned student at a table

### **Suggestions for Mentoring**

1. Develop a positive rapport with student(s) by sharing career information, hobbies, family & pet photos, etc.
2. Ask students about their hobbies, favorite subjects, sports etc.
3. Generate discussions regarding student's goals, academic progress, behavior, social skills, manners etc.

**Guidelines for Volunteers & Mentors**

1. Stay in the assigned area with students.
  2. Never be alone with students.
  3. Discuss general topics with students and refrain from questioning students regarding private or family matters, religion or political views.
  4. Exemplify the characteristics of a “Role Model” by using only appropriate language, dressing respectably, and conducting themselves in a positive manner.
  5. Encourage only friendly handshakes and/or side-by-side hugs so that physical contact is limited.
  6. Use good judgment about confidentiality. Volunteers and Mentors should speak positively about experiences while on campus and share with an administrator or counselor anything that concerns them as soon as possible.
  7. Use no alcohol or tobacco products while on school property.
  8. Use staff restrooms, which are located near the front office.
  9. No food items may be shared with students.
  10. Limit any treats to something to be used: pencils, erasers, etc.  
\* You spending time with a student(s) are the best treat of all!
- All Volunteers and Mentors must complete this application to be considered a volunteer or mentor for GISD.
  - When the form is completed, please submit to the campus principal
  - The campus principal will send the application to the GISD Central Office
  - Central office will complete the background checks and notify the campus principal that volunteers have been cleared or have not been cleared for volunteer / mentor service.
  - Campus principal will notify volunteers / mentors

Graham Independent School District

GRAHAM ISD  
CRIMINAL HISTORY RECORD INFORMATION ADDENDUM  
*Confidential*

☐ Food Service  
☐ Maintenance  
☐ Transportation  
☐ Para-Professional  
☐ Substitute Teacher  
☐ Volunteer

The Texas Education Code, Section 22.083(c), authorizes the Graham Independent School District to obtain criminal history record information on applicants being considered for employment with the District. The information requested below is necessary to obtain criminal history record information.

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

\_\_\_\_\_  
Maiden or other name(s) used e-mail address

\_\_\_\_\_  
Street Address (No P.O. Box) Apartment or #

\_\_\_\_\_  
City County State Zip

Social Security Number#: \_\_\_\_\_ Phone Number \_\_\_\_\_

Driver's License# \_\_\_\_\_ Issuing State \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: ( ) Male ( ) Female

Race: \_\_\_\_\_ American Indian \_\_\_\_\_ Asian \_\_\_\_\_ Black \_\_\_\_\_ White \_\_\_\_\_ Other

List the cities, and states, you have lived in, in the last 10 years. Start with the most recent city.

1. \_\_\_\_\_ 6. \_\_\_\_\_

2. \_\_\_\_\_ 7. \_\_\_\_\_

3. \_\_\_\_\_ 8. \_\_\_\_\_

4. \_\_\_\_\_ 9. \_\_\_\_\_

5. \_\_\_\_\_ 10. \_\_\_\_\_

I understand the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment but will be used solely for the purpose of obtaining criminal history record information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*This form will be removed from the application and filed separately in the personnel office*

## DPS Computerized Criminal History (CCH) Verification (AGENCY COPY)

I, \_\_\_\_\_, have been notified that a computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB information I supply.

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

**(This copy must remain on file by your agency. Required for future DPS Audits)**

\_\_\_\_\_  
Signature of Applicant or Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graham ISD  
Agency Name (Please print)

\_\_\_\_\_  
Julie Elrod  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

**Please:  
Check and Initial each Applicable Space**

CCH Report Printed:

YES ☐ NO ☐ \_\_\_\_\_ initial

Purpose of CCH: \_\_\_\_\_

Hire ☐ Not Hired ☐ \_\_\_\_\_ initial

Date \_\_\_\_\_ initial

Destroyed Date: \_\_\_\_\_ initial

**Retain in your files**

