



École Secondaire LINDSAY THURBER Comprehensive High School

VOLUNTEER REGISTRATION FORM

Name of Volunteer: _____

Address: _____

Home Phone: _____

Other Phone: _____

Email: _____

Child's Name: _____
(if applicable)

Thank you for your willingness to serve as a volunteer at our school. Please be assured that it is greatly appreciated and that it will contribute greatly to enhanced learning experiences for our students.

Please sign below if you are willing for the information shown above, as well as any references you provide to us and information from a Police Information Check, to be shared in confidence with other schools in the Red deer Public School District.

Signature:

Date:



École Secondaire LINDSAY THURBER Comprehensive High School

Request for a POLICE INFORMATION CHECK (Including Vulnerable Sector Check)

Please be advised that the individual named below wishes to serve as a volunteer at Lindsay Thurber comprehensive High School. In accordance with the administrative procedures of the Red Deer Public school District, he or she is required to provide the school with a Police Information Check, including a Vulnerable Sector Check.

The individual named below therefore requests that the requested Police Information Check, including a Vulnerable Sector Check, be completed and that a copy be provided to him or her.

Name of Volunteer: _____

Date: _____



École Secondaire LINDSAY THURBER Comprehensive High School

VOLUNTEER REFERENCE FORM #1

DATE: _____

Name of volunteer applicant: _____

Name of reference provider: _____

Telephone number of reference provider: _____

Number of years for which you have known the volunteer applicant: _____

(minimum two years required)

Capacity in which you know the volunteer applicant:

I hereby confirm that, to the best of my knowledge, it is appropriate for the volunteer applicant to serve as a volunteer in a school setting in which they may have an opportunity to interact with students.

I also hereby consent for this information to be shared with other schools in the Red Deer Public School District.

Name [*please print*]: _____

(Signature of Reference Provider)



École Secondaire LINDSAY THURBER Comprehensive High School

VOLUNTEER REFERENCE FORM #2

DATE: _____

Name of volunteer applicant: _____

Name of reference provider: _____

Telephone number of reference provider: _____

Number of years for which you have known the volunteer applicant: _____

(minimum two years required)

Capacity in which you know the volunteer applicant:

I hereby confirm that, to the best of my knowledge, it is appropriate for the volunteer applicant to serve as a volunteer in a school setting in which they may have an opportunity to interact with students.

I also hereby consent for this information to be shared with other schools in the Red Deer Public School District.

Name [*please print*]: _____

(Signature of Reference Provider)



Acknowledgement and Signature Page

I have completed the following volunteer requirements *(if completed, please use check mark)*:

_____ Police Information Check Request Form, including a request for a Vulnerable Sector Check (for you to complete and provide to the RCMP when requesting a Police Information Check). Note: the RCMP charge a nominal fee for this service

_____ Two **copies** of the Volunteer Reference Form (for you to use in obtaining references)

I acknowledge that I have read and understand the above procedures in their entirety and agree to abide by them.

Signature: _____

Printed Name: _____

Date: _____