

Parent Volunteer Guiding Principles

Dear Parent(s),

We love having parent volunteers at Venture Heights School. Your time, commitment, and skill are valued. Volunteering builds closer relationships between school and community and widens the network of support to our children.

Volunteers, please:

- ✓ **Provide** a *Criminal Records and Vulnerability Sector Check*. To obtain this, visit the Martensville Police Department and mention to them this is a requirement so that you are able to volunteer at Venture Heights School.
- ✓ **Sign** in at the office and **wear** the parent volunteer badge provided by the school secretary.
- ✓ **Respect confidentiality**. This is extremely important as it falls under *The Freedom of Information and Protection of Privacy Act* legislation set out by the Saskatchewan Government. It applies to both the students and the staff of the school.

Parent volunteers have the opportunity to impact the success of many students. Your willingness to contribute is highly regarded by all. Remember, we are modeling the behaviour and language we are expecting from our children, while establishing respect for teaching and learning that will last a lifetime.

Venture Heights creates many opportunities for parents and community members to share talents, skills, and abilities within our school. Some parents assist teachers in the classroom with listening to students read, playing educational games, providing computer support, practicing spelling words or other activities that reinforce skills already taught. Others prefer to volunteer in the library, photocopy, or help with displays and fundraising. If anyone has expertise resulting from one's work, travels, hobbies, or club involvement, we would be happy to incorporate you as a resource person into our school. Please let us know.



Venture Heights Elementary
 801 Sixth Street North
 Martensville, SK S0K 2T2
 Tel: 306-934-2185
 Website:
<http://blogs.spiritsd.ca/ventureheights/>
 Email: vhs@spiritsd.ca

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I have read the above information and agree to adhere to the above parent volunteer guidelines at Venture Heights School. By signing below I give consent to share my contact information with the Venture Heights Parent Volunteer Committee. I also understand that my name and photograph may be used in Venture Heights School print and online media.

_____ (Print Name)

_____ (Signature)

_____ (Date)

Volunteer Contact Information

Name: _____

Phone: _____

Email: _____

Availability:

Week Days	Mornings	Afternoons	Evenings
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Areas of Interest:

___ classroom support

___ extracurricular

___ coaching

___ special events

___ field trips

___ volunteer committee

___ library

___ lunch supervision/programs