

*******IMPORTANT*******

In order to chaperone, volunteer at school, or just visit your student(s) at Fitness Break, lunch or in the classroom the following procedures have been put in place by the School Board of Kenosha Unified School District.

This includes family members, friends and out-of-state visitors so please plan ahead.

Anyone who enters Dimensions of Learning Academy during the school day **MUST** have submitted and had approved the following forms each school year in order to be allowed beyond the School Office:

1. Criminal Information Records Check Permission Form
2. Kenosha Unified School District Non-Employee Chaperone Policy Acknowledgement
3. Dimensions of Learning Chaperone/Volunteer Acknowledgement

These forms take a minimum of 3 weeks to be approved by KUSD Department of Human Resources. The office staff will verify that you have been approved when you sign-in in the office. **You cannot be considered for any chaperone lottery or volunteer service until you have been approved.**

*Please Note: You are **NOT REQUIRED** to turn in a Criminal Information Records Check and Chaperone/Volunteer Acknowledgement into the office **UNLESS** you would like to chaperone, volunteer at school or visit. School Board Policy requires that we have these approved and on file for any non-KUSD employees who are given permission to be in our building at any time during the school day. This is to ensure the safety of all staff and students. (KUSD employees please sign the other 2 forms and submit them along with a memo stating that you are a KUSD employee and where you are assigned.*

You may make as many additional copies of these forms as you need. You will also find these forms on our website and outside of the school office.



Criminal Information Records Check Permission Form

Kenosha Unified School District
Office of Human Resources
3600 52nd Street
Kenosha, WI 53144

Phone: (262) 359-6333
Fax: (262) 359-6116
Email: personnel@kUSD.edu
Website: www.kUSD.edu

I, the undersigned, agree to permit the Kenosha Unified School District to perform a Criminal Information Records Check. I understand that my appointment to a position, my ability to participate as a District volunteer/chaperone, and/or my agreement to perform services as an Independent Contractor in the District will depend upon the results of the Criminal Information Records Check, in accordance with the Kenosha Unified School District Board Policy and the Office of Human Resources. I also understand that the District will not be responsible for any loss or damage to my personal property.

I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by the District. I understand that I have rights under the Fair Credit Reporting Act and that the Summary of Rights can be found at www.consumerfinance.gov/learnmore.

Last Name		First Name		Middle Name	
Aliases / Maiden Name / Other Names Used (if applicable)				Date of Birth	
Email				Social Security Number	
Current Mailing Address		City		State	Zip Code
Name of Student Whose Class You Will Be Volunteering / Chaperoning In (if applicable)				Location / School	
Signature				Today's Date	

The Kenosha Unified School Districts' Board of Education Policy 4332 reads in part:

"A criminal background check shall be conducted for all persons recommended for employment as administrators, teachers, other certified employees, substitute teachers, and all other non-certified employees, including but not limited to substitutes, service employees, educational assistants, secretarial/clerical staff, educational interpreters, carpenters/painters, part-time/temporary, miscellaneous, advisors and coaching assignments.

Likewise, a criminal background check shall be conducted on any persons who have District approved access to children in supervised or unsupervised settings before they will be allowed to come into contact with students. This includes, but is not limited to, chaperones, volunteers, tutors, mentors and independent contractors. A background check may be conducted on board- or administration-appointed standing committee or ad-hoc committee members who may come into contact with students in supervised or unsupervised settings."

The Kenosha Unified School District is an Equal Opportunity Educator/Employer with established policies prohibiting discrimination on the basis of age, race, creed, religion, color, sex, national origin, disability or handicap, sexual orientation, or political affiliation in any educational program, activity or employment in the District. The Superintendent of Schools/designee (262) 359-6320 addresses questions regarding student discrimination and the Director of Human Resources (262) 359-6333 addresses questions regarding staff discrimination.

HUMAN RESOURCES USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		Human Resources Signature	Date
Notes			

RULE 4333
CHAPERONE REQUIREMENTS & EXPECTATIONS

It is expected that all Chaperones read and become familiar with the duties and responsibilities of Chaperones as set forth in the district policy. All Chaperones are subject to board policies and district procedures while on assignment. All individuals seeking to act as a Chaperone will submit to a criminal background check.

Chaperones shall abide by the following for the entirety of the trip/event/assignment:

- Follow the direction of the teacher, advisor, coach, principal or his/her designee in charge of the trip;
- Report any misconduct immediately;
- Be responsible for the safety of assigned students and be aware of their whereabouts at all times;
- Abstain from the consumption and/or use of any alcohol and/or illegal drugs;
- Use appropriate verbal communication and display appropriate physical conduct;
- Refrain from transferring duties and responsibilities to another person;
- Attend to the needs of students outside of their assigned supervision in the event of an emergency or if asked to do so by teacher, advisor, coach, principal or his/her designee in charge of the trip; and
- Comply with all applicable policies and procedures of the district.

Chaperones who do not comply with any of the above provisions will have their services for the school related trip terminated immediately, and district employees serving as Chaperones may also be subject to discipline, up to and including termination.

All Chaperones are required to execute a Chaperone Acknowledgement Form prior to departure for the trip/event/assignment.



**Kenosha Unified
School District**

KUSD Volunteer Chaperone Policy Acknowledgment

By acting as a chaperone, I, _____ understand and expressly agree that:

- A. I will abide by the provisions of the Kenosha Unified School District Chaperone Requirements & Expectations Policy;
- B. During my time as a chaperone, I understand and agree I am subject to all board policies and district policies and procedures; and
- C. A failure to follow the provisions of the Kenosha Unified School District Chaperone Requirements & Expectations Policy and all other applicable district policies and procedures will result in having my services for the trip terminated immediately.

Volunteer name: _____

Signature: _____

Date: _____

2016-2017

DIMENSIONS OF LEARNING ACADEMY

CHAPERONE/VOLUNTEER ACKNOWLEDGEMENT

I understand that while serving as a chaperone or volunteer at Dimensions I am assisting our teaching staff with planned educational opportunities.

- I understand that I am responsible for students assigned to my small and large group at all times.
- I will focus on student learning.
- I will ask questions and seek clarity for myself and encourage my students to do the same.
- I will make sure that my small group stays together at all times.
- I will have quiet, respectful interventions if needed. I will not “yell” (not even at my own child).
- I will be firm and watch to see that my warnings are heeded.
- If a student is not responding to my intervention I will refer them to the teacher.
- I will model and expect school appropriate behavior at all times from all students in my care.
- I will take my group to a gift shop or buy my group a treat ONLY when specifically directed to do so by a teacher. I understand that every activity during the limited time on a field trip or volunteer activity has a specific educational goal.
- I will only share my food with my child and will not allow sharing of food among children (Food Allergies)
- I will only give medication, prescribed or over the counter to my own child.
- I will leave my student and siblings at school until dismissal. I know there are Pre and Post Field Trip Activities in the classroom.
- I will park in the north end of the ELCA parking lot across the street.
- I will review the itinerary and/or any assignment and keep it with me for reference while serving as a chaperone or volunteer
- I will not use tobacco products, smoke cigarettes or use an e-cigarette or vape on school grounds or while serving as a chaperone or volunteer.
- I will have an educational and fun field trip or volunteer experience.

I understand and expressly agree with the conditions for serving as a chaperone or volunteer for Dimensions of Learning Academy.

My Signature

My Name (Please Print)

Date

The students I will be going on a fieldtrip or volunteering for are:

Student Name (Please Print) Grade

Student Name (Please Print) Grade

Student Name (Please Print) Grade

Student Name (Please Print) Grade