



## VOLUNTEER INFORMATION SHEET – FOR NEW VOLUNTEERS

Name of Volunteer:

Date of Birth:

Address:

Phone:

What areas would you like to help with in school? Are there any particular age groups/classes you would like to work with?

Do you have any disabilities / other needs we need to take into account when working as a Volunteer in school? *(Please give details)*

*Thank you for taking time to complete this Volunteer Information Sheet.  
Please hand it to the School Office, marked for the attention of the Deputy Head Teacher, or email an electronic copy (which may be downloaded from the school website) to [school@stivichall.coventry.sch.uk](mailto:school@stivichall.coventry.sch.uk).  
Your offer of help is greatly appreciated, and we will be in touch as soon as possible.*

# Volunteer Agreement



Please read and sign the document below to confirm your agreement with the following school expectations as a volunteer helper:

## As a school we will:

- Provide you with induction information
- Explain your tasks/jobs carefully so that you are clear about what we would like you to do with the children
- Share the school behaviour and ethos policy with you to help you understand how we manage behaviour
- Ensure that the children you work with behave and work well
- Treat you with the highest respect and care
- Inform you of any changes to the school day that will affect you for example if we need to cancel one of your sessions due to an educational visit or an event in school
- Treat anything you tell us with confidentiality
- We will not ask you to deal with difficult or challenging behaviour
- Only ask you to complete tasks that you are confident and able to do

## As a volunteer helper I agree to:

- Follow the school behaviour policy and inform the teacher if I see any inappropriate behaviour
- Inform a member of staff if I observe or hear anything that concerns me in school
- Treat any information with total confidentiality
- Inform the school if I am unable to come into school for any reason
- Respect and listen to the guidance of the teacher at all times
- Complete the appropriate safeguarding checks
- Give details of any medical need that school should be aware of

## I agree not to:

- Share any information about pupils or staff with anyone outside the school staff team, including via social media
- Use any personal recording devices, including mobile phones, in school

Induction

Leader.....

Signed:..... Date: .....

Volunteer Helper:

..... (Printed Name)

Signed:..... Date: .....

## Volunteering on Education Visits Agreement



Thank you very much for offering your time to help taking children on an educational visit. We appreciate the contribution that you are making to our children's learning. Please read, sign and return this agreement to the class teacher and ask them if you have any questions about this form. Thank you.

The teacher responsible for the visit will tell you the itinerary and give you any relevant risk assessments. They will provide details of the group you will be working with and any other important information.

### **When walking with groups of children:**

- Adults walk on the road side of the pavement and spread out down the line of children ensuring that the children stay together.
- Where possible, pedestrian crossings should be used to cross the road. If there are none available, a member of staff will cross to the middle and will stay there to hold traffic up as the children cross.

### **First Aid**

- There will be a member of staff who is a trained First Aider who will administer all first aid. Please inform them of any injuries or illness.
- In the event of an emergency, please inform a member of staff as soon as possible – by mobile phone to the staff on your contact list if necessary

### **Child Protection**

- Stivichall Primary School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. If a child tells you something in confidence or you feel concerned about a child, you **must** speak to the teacher, the Head Teacher, the Deputy Head or the Inclusion Leader (SENCo).

### **We appreciate your support and would ask you to take the time to read the following guidelines that will ensure the visit runs smoothly:**

- If you have any concerns about the behaviour of a member of your group, please speak to a member of staff immediately.
- Please do not take children to the toilet. Notify a member of staff who will take them.
- Please do not use mobile phones and headphones while you are looking after children.
- Please remain vigilant and notify a member of staff of any concerns that you may have.
- Please do not take photographs of the children. Staff will take photos as they are aware of photograph permissions.

*PTO for signed part of agreement ...*

If you have any questions, do not hesitate to ask any members of staff who will be happy to help you. Thank you again for your support.

**We hope that you have a great time on the educational visit.**

**Please sign here:**

I have read the Volunteering on Education Visits Agreement (above).

I agree to the terms and conditions as stated in the agreement.

I will support the young people in enjoying the trip and actively contribute to the smooth running of the event.

I will treat any information I may hear about pupils as confidential and will not discuss or disclose it out of school.

Signed: \_\_\_\_\_

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