

VOLUNTEER CONDUCT COVENANT

Northdale Christian Academy is a member of the Wisconsin Evangelical Lutheran Synod. We exist to make disciples of Jesus for time and for eternity using the Gospel of our Lord Jesus Christ. As we teach our children about the salvation that is theirs in Jesus, we have the opportunity to teach them his love in the lives we live. As a volunteer/chaperone during school sanctioned functions, you have the amazing opportunity to also model this love of Jesus Christ for our children and represent Northdale Christian Academy.

It is necessary for you to know the expectations that we have for our volunteers and what boundaries we would like to see maintained when you are functioning as a "volunteer" (i.e. chaperone, assistant, tutor, driver) during any school sanctioned event. We want our volunteers to:

- Conduct themselves at all times with dignity as they set a Christian example in conduct, dress, punctuality, reliability, and cheerfulness.
- Recognize that they are working under the supervision and guidance of a teacher at Northdale Christian Academy.
- Work in harmony with the principal and teacher.
- Ensure that the children under their care are following the instructions of the teacher and participating positively in all activities.
- Keep the children under their care as their first priority while volunteering. Therefore, they will keep their attention on the children and ensure their safety at all times.
- Maintain the privacy of the students, especially with discipline cases or academic challenges.
- Refrain from activity that is not appropriate while volunteering with children, which includes the following:
 - Consuming alcoholic beverages or other illegal substances.
 - Profanity and inappropriate language or gestures.
 - No smoking while around children.
 - Inappropriate physical touching, which includes disciplining students physically.
- Disclose to school administration if you observe another volunteer violating any of these standards.

By acceptance of your duties as a volunteer, you are also certifying that you have not personally been involved in any incidents of child molestation, child abuse, sexual misconduct, exploitation or harassment in this or any state in the past. By signing this form, you are agreeing to the above expectations and stating your willingness to abide them as a volunteer at Northdale Christian Academy.

Thank you for your willingness to serve and your commitment to build God's Kingdom. We are grateful for your time and service and through it may Jesus our Lord be glorified.

Volunteer's Printed Name _____

Signature _____

Date _____

NOTICE – BACKGROUND INVESTIGATION

In connection with your employment or to serve as a volunteer with Northdale Christian Academy (the “Company”), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and Protect My Ministry 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618; Phone: 1-800-319-5581. For information about Protect My Ministry’s privacy practices, see www.protectmyministry.com. The scope of this notice and below authorization is not limited to the present and, if you are hired, will continue throughout the course of your employment and allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

ACKNOWLEDGEMENT AND AUTHORIZATION

TODAY’S DATE _____

LAST NAME _____ FIRST NAME _____ MIDDLE _____

Please List Other Names Used _____

HOME ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

SSN D/L or STATE ID STATE ISSUED

EMAIL ADDRESS

For identification purposes only, please provide FULL DOB: _____

By signing below I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by the Company at any time after receipt of this authorization and throughout the course of my employment, if applicable.

Signature: _____ Date: _____

Print Name: _____ Last Four Digits of SSN: _____