



Volunteer Coach or Supervisor Orientation Verification

Record of orientation before working with students

FORM-CP-002

INTERNAL

Notice of collection. The personal information collected on this form is collected by Grasslands Public Schools under the authority of POPA section 4(c) and the *Education Act* SA 2012 section 33(1)(d), in support of recording that a volunteer coach or supervisor has been oriented to the Division's expectations before working with students. This notice is provided in accordance with POPA section 5(2). The information is used to identify the volunteer and the activity they are approved to lead, record which orientation topics were discussed, and confirm the volunteer's agreement to adhere to Division and school expectations.

If you have any questions about the collection or use of this information, please contact the Access and Privacy Coordinator at privacy@grasslands.ab.ca or 403-793-6700.

Volunteer and activity

VOLUNTEER NAME

ACTIVITY OR SPORT

SCHOOL

Orientation topics

I attest that I have had the opportunity to review with the principal (or designate) the expectations related to being a volunteer coach or supervisor for the activity and school named above. The orientation covered:

- ☐ School philosophy regarding participation of students (selection, playing time, behaviour expectations, and similar).
- ☐ Use of school facilities and equipment.
- ☐ Safety and medical procedures, including concussion protocols and hazing.
- ☐ Supervision expectations.
- ☐ Discipline and referral procedures.
- ☐ Conducting a parent meeting and communication with parents.
- ☐ Finances and fund-raising.
- ☐ Transportation procedures.
- ☐ Professional development opportunities.
- ☐ Review of the board policies and administrative procedures affecting the activity. Every orientation session covers AP-905 Student Conduct, AP-931 Identification and Management of Concussions, AP-760 Volunteers, and Policy 110 Welcoming, Caring, Respectful and Safe Learning and Working Environments.

Acknowledgement

By signing this, I signify I understand the school's and division's positions with regard to the above expectations, and agree to adhere to those positions through my involvement with students involved in the activity.

VOLUNTEER SIGNATURE / E-SIGNATURE

DATE

YYYY-MM-DD

SCHOOL ADMINISTRATOR NAME

SIGNATURE / E-SIGNATURE

DATE

YYYY-MM-DD