



## VOLUNTEER INFORMATION

Welcome and thank you for volunteering to work in our schools!

In order to meet requirements for volunteering in public schools as outlined in the California Education Code, please complete the following:

1. A Tuberculosis (TB) Clearance must be on file prior to any services rendered to the District. Please make arrangements to complete a TB Risk Assessment with your personal physician. Your TB Risk Assessment (See *attached Risk Assessment form*) is done at your own expense and is valid for four (4) years.
2. The District's Board Policy and Administrative Regulation 1240 - Volunteer Assistance can be found under Human Resources on the Volunteer page at [www.sesd.org](http://www.sesd.org).
3. The District encourages all volunteers to take the online *Mandated Reporter* training. Please see the attached information sheet if you are interested in registering to take the training.
4. Fill out the "Volunteer Information Form" and return it along with your TB Clearance to the Principal at the school site where you will be doing your volunteer work.
5. When all the California Education Code requirements are met, the Human Resources Department will notify the school that you are cleared to begin your volunteer work.
6. Please remember to always confirm any volunteer services with the Principal, classroom teacher, or parent/teacher organization before you begin.
7. Please note that additional information may be needed if you will be driving students on fieldtrips, volunteering one-on-one with students, and/or volunteering with preschool students.

**ENJOY YOUR WORK WITH OUR STUDENTS AND, AGAIN, THANK YOU FOR YOUR SERVICE TO OUR SCHOOLS!**



## Volunteer Information Form

Teacher Name: \_\_\_\_\_ Student Name: \_\_\_\_\_

School: B CC CMS CU E F L SM SMS V Pre (circle one)

Your Name: \_\_\_\_\_ Your Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_  
Number Street City Zip

Phone Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Area Code Phone No Area Code Phone No

Email Address: \_\_\_\_\_@\_\_\_\_\_

1.) Will the volunteer ever be alone 1:1 with a student? Yes \_\_\_\_\_ No \_\_\_\_\_

2.) Will the volunteer be driving on field trips? Yes \_\_\_\_\_ No \_\_\_\_\_

3.) If you answered yes to questions 1 or 2, please explain:

\_\_\_\_\_  
\_\_\_\_\_

4.) Brief description of work to be performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5.) Estimated number of hours/days during the school year: \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Site Principal

### For Human Resources Use Only

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

TB Clearance Date: \_\_\_\_\_ Renewal Date: \_\_\_\_\_ Education Code Citation  
Clearance Date: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Human Resources Staff Member

Date Notification Sent to School Site: \_\_\_\_\_ Live Scan Clearance Date: \_\_\_\_\_



## Adult Tuberculosis (TB) Risk Assessment Questionnaire<sup>1</sup>

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555)

To be administered by a licensed health care provider (physician, physician assistant, nurse practitioner, registered nurse)

Name: \_\_\_\_\_ Date of Risk Assessment: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

History of positive TB test or TB disease    Yes     No

If yes, a symptom review and chest x-ray (if none performed in previous 6 months) should be performed at initial hire.\*  
If no, continue with questions below.

If there is a “Yes” response to any of the questions 1-5 below, then a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) should be performed. A positive test should be followed by a chest x-ray, and if normal, treatment for TB infection considered.

Risk Factors	
1. One or more signs and symptoms of TB (prolonged cough, coughing up blood, fever, night sweats, weight loss, excessive fatigue) Note: A chest x-ray and/or sputum examination may be necessary to rule out infectious TB. <sup>2</sup>	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Close contact with someone with infectious TB disease	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Birth in high TB-prevalence country** (* Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Travel to high TB-prevalence country** for more than 1 month (* Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Current or former residence or work in a correctional facility, long-term care facility, hospital, or homeless shelter	Yes <input type="checkbox"/> No <input type="checkbox"/>

\*Once a person has a documented positive test for TB infection that has been followed by an x-ray that was deemed free of infectious TB, the TB risk assessment is no longer required.

<sup>1</sup> Adapted from a form developed by Minnesota Department of Health TB Prevention and Control Program and Centers for Disease Control and Prevention.

<sup>2</sup> Centers for Disease Control and Prevention (CDC). Latent Tuberculosis Infection: A Guide for Primary Health Care Providers. 2013.

(<http://www.cdc.gov/tb/publications/LTB/default.htm>)



## ADULT TUBERCULOSIS (TB) RISK ASSESSMENT QUESTIONNAIRE

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555)

### CERTIFICATE OF COMPLETION

*To be signed by the licensed health care provider completing the risk assessment and/or examination*

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

Date of Birth: \_\_\_\_\_

*The above named patient has submitted to a tuberculosis risk assessment. The patient does not have risk factors, or if tuberculosis risk factors were identified, the patient has been examined and determined to be free of infectious tuberculosis.*

Health Care Provider Signature

Please Print Health Care Provider Name

Title

Office Address: Street

City

State

Zip Code

Telephone

Fax

## *Expectations of Our Volunteers*

1. Please sign-in and pick up a visitor/volunteer sticker/badge to wear upon arrival when volunteering at any of our school sites and remember to sign-out when leaving.
2. Great communication is key. Let the school site know what types of things you would like to help with and what you are, and are not, comfortable doing.
3. Be a good listener. Encourage students with positive words and comments.
4. Being flexible, especially in the classroom, keeps tasks running smoothly.
5. Contact teachers via email, voicemail, or before and after class. Class time must be focused on the students.
6. It is not a volunteer's job to discipline a student. It is acceptable to stop unsafe or unkind behavior. School personnel must be informed immediately if any discipline issues arise.
7. Be dependable and on time. If you do run late, try not to interrupt classroom instruction.
8. If you are volunteering in your child's classroom, treat your child as you would any other child in the class. Make outside arrangements for childcare for younger siblings instead of bringing them to school during volunteer time.
9. Don't gossip. Volunteers may hear or see things that are private information concerning a student. It is expected that our volunteers keep this information confidential.
10. Don't compare one student to another. Accept each child as he/she is.
11. Know and follow classroom/school rules.
12. Most of all – Strive to widen the horizons of our students by being a concerned, helpful, warm, and friendly role model with a sense of humor.



**Sunnyvale School District**  
*Human Resources*

**Mandated Reporter Online Training**  
(All Volunteers)

New law (AB 1432), effective January 1, 2015, requires school districts to provide annual training to their employees, and other persons working on their behalf, who are mandated reporters using an online training module. This online training covers child abuse and neglect mandated reporting information and requirements.

Volunteers whose duties require direct contact with, and supervision of, children are not mandated reporters but are encouraged by the District to obtain training in the identification and reporting of child abuse and neglect and are further encouraged to report known or suspected instances of child abuse or neglect to Child Protective Services or the local police department. Your school site principal or assistant principal are available to assist you in reporting suspected child abuse and neglect.

This training is free and a Certificate can be printed out upon completion. This is a half-hour online training that is self-paced and can be started, stopped, and returned to at any time.

If you are interested in taking the Mandated Reporter online training, or if you have any questions, please feel free to contact Deborah Dodge in Human Resources at [deborah.dodge@sesd.org](mailto:deborah.dodge@sesd.org) to obtain your user ID and password.



The definition of sexual harassment includes many forms of offensive behavior.



- such as a lead, supervisor, manager or agent;
- the employer had no knowledge of the harassment;

- there was a program to prevent harassment; and
- once aware of any harassment, the employer took immediate and appropriate corrective action to stop the harassment.

**Filing a Complaint**

Employees or job applicants who believe that they have been sexually harassed may file a complaint of discrimination with DFEH within **one year** of the harassment.

DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes.

If DFEH finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a civil complaint in state or federal court on behalf of the complaining party. The DFEH may seek punitive damages is entitled to attorney's fees and costs if it prevails in litigation.

Remedies include:

- Fines or damages for emotional distress from each employer or person found to have violated the law
- Hiring or reinstatement
- Back pay or promotion
- Changes in the policies or practices of the involved employer

Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

For more information, see publication DFEH-159 "Guide for Complainants and Respondents."

For more information, contact DFEH toll free at **(800) 884-1684**  
TTY number at **(800) 700-2320**  
or visit our Web site at **www.dfeh.ca.gov**

*In accordance with the California Government Code and ADA requirements, this publication can be made available in Braille, large print, computer disk, or tape cassette as a disability-related reasonable accommodation for an individual with a disability. To discuss how to receive a copy of this publication in an alternative format, please contact DFEH at the numbers above.*



**State of California**  
Department of Fair Employment & Housing

**Sexual Harassment**

**The Facts About Sexual Harassment**

The *Fair Employment and Housing Act* (FEHA) defines sexual harassment as harassment based on sex or of a sexual nature; gender harassment; and harassment based on pregnancy, childbirth, or related medical conditions. The definition of sexual harassment includes many forms of offensive behavior, including harassment of a person of the same gender as the harasser. The following is a partial list of types of sexual harassment:

- Unwanted sexual advances
- Offering employment benefits in exchange for sexual favors
- Actual or threatened retaliation
- Leering; making sexual gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
- Making or using derogatory comments, epithets, slurs, or jokes
- Sexual comments including graphic comments about an individual's body; sexually degrading words used to describe an individual; or suggestive or obscene letters, notes, or invitations
- Physical touching or assault, as well as impeding or blocking movements
- Sexual desire is not necessary



The mission of the Department of Fair Employment and Housing is to protect the people of California from unlawful discrimination in employment, housing and public accommodations, and from the perpetration of acts of hate violence.

### Employers' Obligations

All employers must take the following actions against harassment:

- Take all reasonable steps to prevent discrimination and harassment from occurring. If harassment does occur, take effective action to stop any further harassment and to correct any effects of the harassment.
- Develop and implement a sexual harassment prevention policy with a procedure for employees to make complaints and for the employer to investigate complaints. Policies should include provisions to:
  - Fully inform the complainant of his/herrights and any obligations to secure those rights.
  - Fully and effectively investigate. The investigation must be thorough, objective, and complete. Anyone with information regarding the matter should be interviewed. A determination must be made and the results communicated to the complainant, to the alleged harasser and, as appropriate, to all others directly concerned.
  - Take prompt and effective corrective action if the harassment allegations are proven. The employer must take appropriate action to stop the harassment and ensure it will not continue. The employer must also communicate to the com-

plaintain that action has been taken to stop the harassment from recurring. Finally, appropriate steps must be taken to remedy the complainant's damages, if any.

- Post the Department of Fair Employment and Housing (DFEH) employment poster (DFEH - 162) in the workplace (available through the DFEH publications line [916] 478-7201 or Web site).
- Distribute an information sheet on sexual harassment to all employees. An employer may either distribute this pamphlet (DFEH 185) or develop an equivalent document that meets the requirements of Government Code section 12950(b). This pamphlet may be duplicated in any quantity. **However, this pamphlet is not to be used in place of a sexual harassment prevention policy, which all employers are required to have.**
- All employees should be made aware of the seriousness of violations of the sexual harassment policy and must be cautioned against using peer pressure to discourage harassment victims from complaining.
- Employers who do business in California and employ 50 or more part-time or full-time employees **must** provide at least two hours of sexual harassment training every two years to each supervisory employee and to all new supervisory employees within six months of their assumption of a supervisory position.

- A program to eliminate sexual harassment from the workplace is not only required by law, but is the most practical way for an employer to avoid or limit liability if harassment should occur despite preventive efforts.

### Employer Liability

All employers, regardless of the number of employees, are covered by the harassment section of the FEHA. Employers are generally liable for harassment by their supervisors or agents. Harassers, including both supervisory and non-supervisory personnel, may be held personally liable for harassing an employee or coworker or for aiding and abetting harassment. Additionally, the law requires employers to take "all reasonable steps to prevent harassment from occurring." If an employer has failed to take such preventive measures, that employer can be held liable for the harassment. A victim may be entitled to damages, even though no employment opportunity has been denied and there is no actual loss of pay or benefits.

In addition, if an employer knows or should have known that a **non-employee** (e.g. client or customer) has sexually harassed an employee, applicant, or person providing services for the employer and fails to take immediate and appropriate corrective action, the employer may be held liable for the actions of the non-employee.

An employer might avoid liability if

- the harasser is not in a position of authority,