

**PARENT VOLUNTEER AGREEMENT FORM**  
**PS 24 The Spuyten Duyvil School**

To ensure the success of our Parent Volunteer Program, I  
\_\_\_\_\_ agree to the following Guidelines and  
Expectations:

- I agree to 1 hour/week of volunteer service in a 3-5 month period.
- I agree to commit to one hour a week (e.g.) of volunteer service in the capacity chosen by administration to which there is most need of my assistance.
- I agree to keep observations, experiences and information confidential to protect the privacy of students and staff.
- I agree there will be NO picture/video taking or use of cell phones in any way during my time on duty.
- I understand that I will not be permitted to work with my own child's class or grade unless it is at the request of school administration.
- I understand that younger siblings MAY NOT accompany me while I am performing my weekly volunteer duty.
- I agree to sign in and out of the school at the front desk and to always provide proper photo identification.
- I agree to be prompt, reliable and conscientious
- I agree to be patient and kind and to model POSITIVE behavior
- I agree to use respectful, encouraging, and appropriate language when speaking with students and adults
- I agree to follow established disciplinary policies and procedures consistently and to respect the activities as outlined by administration and teaching staff

Volunteer Name \_\_\_\_\_

Signature \_\_\_\_\_

Child's Name, Grade & Class  
\_\_\_\_\_