

## PARENT VOLUNTEER AGREEMENT

## **Volunteering Conditions**

I understand that to volunteer at Coral Academy of Science Las Vegas during the 2024-2025 school year, I am required to:

- 1. submit fingerprints in order to volunteer in the classroom, on field trips, and/or at any other formal school function or activity (e.g. chaperoning a sporting trip.) (see the instructions below)-and
- 2. provide the paperwork listed under "Documentation" below.

The submission of fingerprinting and the documentation below are pre-conditions in order to become a CASLV Parent Volunteer.

#### Documentation.

I under	stand that in order to be a parent volunteer I must:
	Read and Sign this "Parent Volunteer Agreement"; and
	Read and Sign the "Fingerprint Background Waiver"; and
	Provide to the Fingerprint Technician a valid, non-expired government issued photo identification, for verification purposes, prior to being fingerprinted; <u>and</u>
	Submit the Confirmation Receipt with all of the above listed items to the front office staff of the school where I am seeking to volunteer.

## Mandatory Reporting Duty.

I understand that in compliance with NRS 432B.200 (as amended by S.B. 287 (2017)), parent volunteers for a public school, regardless of whether they are licensed, are required to report the suspected abuse or neglect of a child by a person responsible for the child's welfare.

#### Confidentiality.

I understand that as a volunteer at Coral Academy of Science Las Vegas, ALL student and staff information which I may be exposed to is strictly confidential. I agree not to access, review, disclose, or use confidential student or staff information without specific authorization from a school administrator. I understand that even when I am no longer a volunteer with Coral Academy of Science Las Vegas, any confidential information I have learned must remain confidential. I understand that any breach of these confidentiality requirements will result in my immediate termination as a volunteer and may result in legal action against me.

#### Policy Compliance.

I understand that I must comply with all Coral Academy of Science Las Vegas policies and procedures applicable to school staff as well as all direction from school administrators and staff while serving as a volunteer.

### Continuing Service.

I further understand that my authorization to serve as a volunteer may be terminated at the discretion of the Executive Director and School Principal at any time if they determine it is the best interest of the students and/or school.

## Fingerprint Handling/Processing

I will have my fingerprints taken at Fingerprinting XPRESS. I understand they will submit my fingerprints to the Nevada Department of Public Safety and FBI, both of which will run my prints and send a criminal history report to the Human Resource Director. **This process may take up to** <u>3-6 weeks</u>. Criminal history reports are confidential and will not be shared with any individual or other agency.

After my fingerprints are taken, the technician will give me a confirmation receipt. I will be sure to share this receipt with the front office staff at the school where I am seeking to volunteer. This will be forwarded to the school's Human Resources department as a confirmation that my fingerprints have been taken.

Unless exigent circumstances exist, I will not be able to volunteer in the classroom until the Human Resource Director has reviewed the criminal history report.

# **Approval/Denial Process**

I understand that in determining which volunteers will be subject to fingerprinting, the CASLV Executive Team may consider all appropriate factors, including the nature, frequency and duration of volunteer work and whether or not the volunteer may have unsupervised contact with minors. Volunteers who have a felony conviction will not be eligible to serve as a volunteer. Volunteers who are currently on formal or informal probation will not be eligible to serve as a volunteer until the probationary period has been completed. Parents and/or guardians are not prohibited from being active in their children(s) education; however, they may be limited in volunteer capacities due to prior convictions and/or probationary periods.

I have read, understand, and agree to the information presented above:

Volunteers Name:	Date:	
Volunteers Signature:	Phone Number:	
Volunteers Email Address:		
Principal's Name:	Campus:	
Principal's Signature:		

www.CASLV.org | info@coralacademylv.org



## FINGERPRINT BACKGROUND WAIVER

As an applicant who is the subject of a Federal Bureau of Investigation (FBI) fingerprint-based criminal history record check for a noncriminal justice purpose you have certain rights which are discussed below.

Coral Academy of Science Las Vegas

be used to check the criminal history records of the FBI and the State of Nevada.

that your fingerprints will

1. You must be notified by

- 2. If you have a criminal history record, the officials making a determination of your suitability for the job, license or other benefit for which you are applying must provide you the opportunity to complete or challenge the accuracy of the information in the record. You may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency. The proper forms and procedures will be furnished to you by the Nevada Department of Public Safety, Records Bureau upon request. If you decide to challenge the accuracy or completeness of you FBI criminal history record, Title 28 of the Code of Federal Regulations Section 16.34 provides for the proper procedure to do so:
  - 16.34 Procedure to obtain change, correction or updating of identification records. If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.
- 3. Based on 28 CFR § 50.12 (b), officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- 4. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
- 5. I hereby authorize <u>Coral Academy of Science Las Vegas</u>, to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.

In giving this authorization, I expressly understand that the records may include information pertaining to notations of arrest, detainments, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the

status of my parole or probation when applicable.

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name:	_
(PLEASE PRINT LAST, FIRST, MIDDLE)	
Address:	
Applicant's Signature:	_Date:
Submitting Agency: Coral Academy of Science Las Vegas	_
Address: 8985 S. Eastern Blvd. #375, Las Vegas, NV 89123	_
Agency representative: Peevy, Bridget Denise	_
(PLEASE PRINT LAST, FIRST, MIDDLE	
Agency representative's Signature:	
Date:	