

VOLUNTEER ASSURANCE FORM

LITCHFIELD SCHOOL DISTRICT

Dear Volunteer Applicant:

Welcome to our school volunteer Program! Without your caring and willingness to give of your talents and resources, we would not be able to provide many of the services now available to our students.

We regret that because of disturbing incidents in schools throughout the United States, it is necessary for us to take precautions in screening our volunteers. Please bear with us and be assured that we are not trying to discourage volunteers from joining us in serving our children. Rather, this is an effort to prevent the rare, but real possibility of a volunteer entering our schools for less than honorable purposes.

We ask that you read New Hampshire RSA 632-A:10, Prohibition from Child Care Service of Persons Convicted of Certain Offenses, which has been reprinted below. After reading the RSA, please sign the Volunteer Assurances form, also below, and return the form to your school office. We hope you understand the necessity of our taking this precautionary step. It will help parents to feel confident that their children are safe in our schools.

Thank you for your understanding and for your willingness to help improve the services we offer to our students.

James L. O'Neill
Superintendent of Schools

NEW HAMPSHIRE EDUCATION LAWS ANNOTATED

RSA 632-A:10 Prohibition from Child Care Service of Persons Convicted of Certain Offenses

- I. A person is guilty of a class A felony if, having been convicted in this or any other jurisdiction of any felonious offense involving child pornography, or of a felonious physical assault on a minor, or of any sexual assault, he knowingly undertakes employment or volunteer service involving the care, instruction or guidance of minor children, including, but not limited to, service as a teacher, a coach, or worker of any type in child athletics, a day care worker, a boy or girl scout master or leader or worker, a summer camp counselor or worker of any type, a guidance counselor, or a school administrator of any type.
- II. A person is guilty of a class B felony if, having been convicted in this or any other jurisdiction of any of the offenses specified in Paragraph I of this section, he knowingly fails to provide information of such conviction when applying or volunteering for service or employment of any type involving the care, instruction, or guidance of minor children, including, but not limited to the types of services set forth in Paragraph I.
- III. A person is guilty of a class B felony if, having been convicted in this or any other jurisdiction of any of the offenses specified in Paragraph I of this section, he knowingly fails to provide information of such conviction when making application for initial teacher certification in this State.

VOLUNTEER ASSURANCES

Name _____ Date of Birth _____

Address _____

Home Telephone _____ Work Telephone _____

1. I certify that I have read and understand RSA 632-A:10, reprinted above.
2. I certify that I have never been convicted of any crime or offense involving child pornography, assault on a minor, or any sexual assault as described in RSA 632-A:10.
3. I understand that my name will be forwarded to the District Human Resources Department for a screening.
4. Please indicate type of volunteer: _____ Designated (Overnight) Volunteer _____ Volunteer

Signature of Volunteer _____ Date _____

After reading and signing this form, please return it to the school office. Thank you!