



The Emery Ed Fund mobilizes local and regional resources to bring increased funding, innovative programs and strong partnerships to Emeryville's public schools.

## Become a Community or School Volunteer

### Through the **Emery Ed Fund**

Thank you for your interest in the Emery Ed Fund's Community and School Volunteer Program. You will be joining a growing number of business professionals, artists, musicians, college students and community members who offer their time and energy to improve the quality of life for Emeryville's youth through volunteering in various capacities in the Fund's offices, in the schools, and throughout the greater community.

Please complete the following steps to register and begin volunteering:

- **Provide the completed volunteer packet documents to the Fund:**
  - You can fax, drop off, or mail in our application to our P.O. Box
- **When volunteering with youth and/or in the schools:**
  - Please complete the volunteer application checklist at the end of the application and make sure all items are checked off.
- **For volunteers working with youth independently, get LiveScan finger printed by the Emeryville Police Dept.**
  - LiveScan Fingerprinting is provided at **no** cost to Emery Ed Fund volunteers.
  - Contact Sherry at 510-596-3718 for an appointment
- **Meet with Emery Ed Fund Staff or attend a Volunteer Orientation:**
  - Contact the Ed Fund at (510) 601-4911 or via email at [volunteer@emeryed.org](mailto:volunteer@emeryed.org) to make arrangements

There are many volunteer opportunities available throughout the school system in all grades. The Emery Ed Fund's staff will work with you to determine where your interests, skills and availability could be best utilized.

School placement takes from one to two weeks, depending on receipt of your completed paperwork, proof of negative TB test, and completed fingerprinting/background check.

**To start the volunteer registration process, turn in all application materials to our P.O. Box below, or to ask questions contact:**

C. Phillip Powell  
Program Manager  
Emery Ed Fund  
P.O. Box 8926  
Emeryville, CA 94662  
Phone: (510) 601-4911  
Fax: (510) 601-4993  
[volunteer@emeryed.org](mailto:volunteer@emeryed.org) / [www.emeryed.org](http://www.emeryed.org)

# Emery Ed Fund (Online Applicant) Community Volunteer Application

Name First and Last \_\_\_\_\_

## 1. Other Information

a. I would like to volunteer in another capacity (Please explain):

---

---

b. I have the following special interests/hobbies that I can share:

---

---

c. I have the following experience in non-profit organizations/education:

---

---

d. I have the following experience/background in teaching or tutoring:

---

---

e. I speak a language other than English and would be willing to tutor or mentor a student. My languages and level of proficiency (read, write, speak, fluent, familiar, beginner) are:

---

---

f. I am seeking credit (observation requirement for Teacher Education Program, Community Service Requirement, etc.) (Please explain).

---

---

g. I have been convicted of a felony. Yes No  
(if yes, please write an explanation on a separate sheet of paper.)

**The following must be submitted before working with youth in the schools, please check off each item:**

- Signed Megan's Law Volunteer Screening Request (attached)
- Copy of Driver's License
- Completed Application Form
- Completed Reference Form(attached)
- Tuberculosis Test Results (please refer to the list of TB Test providers)

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

Submit your completed application, with appropriate verifications and a copy of your reference and **Drivers License** to: C. Phillip Powell, Program Manager, Emery Ed Fund, P.O. Box 8926, Emeryville CA 94662, Phone: (510) 601-4999, Fax: (510) 601-4993, Email: [volunteer@emeryed.org](mailto:volunteer@emeryed.org). Thank you for your interest!



The Emery Ed Fund mobilizes local and regional resources to bring increased funding, innovative programs and strong partnerships to Emeryville's public schools.

## Megan's Law Volunteer Screening Request

Dear School Volunteer:

Thank you for your interest in volunteering in our district. The important work of the School District is enhanced on a daily basis by valuable contributions of parent and community volunteers. The purpose of this screening is to ensure that no one working with our children has a record of sexual misconduct thus providing a safe and positive environment for our students. Individuals interested in volunteering at a school must complete this request to volunteer form **prior** to initiating any volunteer activity. This process will be repeated **every year** for all individuals. Once it has been determined that the potential volunteer has not been identified on the Megan's Law list, the principal will approve your request.

Your request will be screened through the Megan's Law list posted through the Office of the State Attorney General. In order to complete the screening process we ask that you complete the information below and return it to your school secretary. You will need to complete one form for each site where you will be volunteering. This form is considered confidential and will only be seen by the Emery Ed Fund Administrative staff and/or (or designated Emery Unified School District Human Resources staff), and the Alameda County Sheriff's Department if necessary. This final list of approved parents may be shared with teachers, staff members, and parents who are responsible for volunteers.

Sincerely,

Phillip Powell  
Program Manager

---

---

**Please print clearly**

Volunteer Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

CA Drivers License or CA I.D. Number: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**I authorize the Emery Ed Fund to submit this information to the Sheriff's Department if necessary to complete the volunteer screening process.**

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

# Volunteer Reference Form

## Emeryville School Volunteers

**Volunteer Name:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

Please provide contact information for one reference that can verify your current or past work/volunteer experience (past/present supervisor, co-worker, instructor, member of the clergy, etc.). ***Close friends and family members are not considered references.***

**Reference Name:** \_\_\_\_\_

**Title/Position:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

This is a  Home  Business Address.

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**I agree to let the Emery Ed Fund contact the above reference to check my volunteer or job experiences. I understand that this information will be treated as confidential between the Emery Unified School District, the Emery Ed Fund, and my reference.**

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

Daytime Phone \_\_\_\_\_

Evening \_\_\_\_\_

C. Phillip Powell  
Program Manager  
Emery Ed Fund  
P.O. Box 8926  
Emeryville, CA 94662  
Location: 4727 San Pablo Ave., R & D Office  
Phone: (510) 601-4911  
FAX: (510) 601-4993  
[volunteer@emeryed.org](mailto:volunteer@emeryed.org)  
[www.emeryed.org](http://www.emeryed.org)

# Volunteer Staff Service Agreement

I will provide the Emery Ed Fund with a completed application form, reference, TB clearance, and copy of a valid driver's license. If I plan to mentor a student, I will provide a Livescan.

I agree to follow school and classroom rules and regulations.

I will spend my scheduled time with students doing site approved and/or assigned activities.

I will respect the school's dress code: no sunglasses, hoodies with the hood up, flip flops, bare midriffs, sagging pants; or, clothing with logos depicting drugs, tobacco, alcohol, or anything sexually suggestive or involving a racial/ethnic slur.

I will never remove a child from the designated school area, or make plans to meet a student during non-school hours for any reason without the express permission of the teacher in charge and the Emery Ed Fund.

I will never discipline any child. In case of a situation that requires a disciplinary action, I will notify the lead teacher immediately.

I will be free from the influence of alcohol or illegal drugs while volunteering.

I will not use electronic devices such as cell phones, music players, Blackberries, etc. while working with students.

I will not engage in any act which is discriminatory in nature towards another person's race, creed, ethnicity, national origin, sex, sexual orientation, age, physical condition, religious beliefs, political afflictions, veterans or martial status.

I agree to the above codes of conduct and will never purposefully endanger the well being or life of a child.

I agree to pass on knowledge of or suspicion of child abuse to an appropriate Emeryville Unified School District staff member.

I agree to notify the emery Ed Fund and my supervising teacher if I cannot continue my volunteer commitment.

I realize that any breach of the above policies may result in my dismissal.

Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

*(Parent or Guardian Signature required if volunteer is under 18)*

