

**Give Every Child A Chance** 322 Sun West Place, Manteca, CA 95337 Office: (209)825-7003 / Fax: (209)823-6255

Volunteer Mentor-Tutor Application

- 1. Sign and turn in completed application to the Education Center located at 322 Sun West Pl. Manteca, CA 95337.
- 2. Volunteers 18 years or older-please turn in signed Fingerprint Policy Statement and completed DOJ Live Scan Form with your application. You can get a DOJ Live Scan Form from the Education Center.
- 3. Contact the Education Center (209-825-7003) immediately for available dates/times to schedule your Volunteer Orientation.

## **VOLUNTEER INFORMATION**

Last:	First:	MI:	_ Male Female				
Home Phone:	Alternate	Number:					
Address:	City:		Zip:				
Date of Birth: School	l:	_ Teacher:	Grade/Age:				
Parent/Guardian Email Address:	arent/Guardian Email Address:Volunteer Email Address:						
What years have you tutored (check all that	apply):□ <u>10-11</u> □ <u>11-12</u> □ <u>12-13</u> [	⊐ <u>13-14</u> □ <u>14-15</u> □ <u>15-1</u>	<u>6</u> □ <u>16-17</u> □ <u>17-18</u>				
How were you recruited as a Volunt	eer Mentor/Tutor?						
□Newspaper □Another Tutor □Cl	nurch □School □Family Mem	ber/Friend DOther:					
Volunteer Lives With: (check all that ap	ply) □Mother □Father □Guard	ian □Spouse □Self					
Total No. Living in Household:							
Emergency Contact:							
Name:	Phone:	R	elation:				
Primary Physician:	Phone						
Health Insurance (circle one): NO Y	'ES Carrier Name:	Pol	icy #:				
Health Concerns, Allergies, or Disabilities	(circle one): NO YES if yes, pl	ease list:					
The following information is <u>MANDATORY</u> ETHNIC BACKGROUND (check all that	apply): <u>ARE YOU HIS</u>	SPANIC/LATINO? (check	a one) 🗆 NO 🛛 YES				
$\Box$ Black/African American $\Box$ White	$\Box$ Asian $\Box$ Am. Indian/Alaska	n Native 🗆 Native Haw	vaiian/Other Pacific Islander				
□ Black/African Am. & White □ Asi	an & White 🛛 Am. Indian/Ala	skan Native & White					
□ Am. Indian/Alaskan Native & African .							
For Office Use Only:	or Office Use Only: Fingerprint Live Scan						
[]	Date Sent		Date Received				
Date Stamp Received							
	Orientation						
Date Signature							

# **VOLUNTEER INFORMATION (continued)**:

Mossdale School

455 Brookhurst Blvd., Lathrop Neil Hafley School

849 Northgate Dr., Manteca

Please list any information that might be helpful in placing you with a student. (For example: experience with children, bilingual skills, computer knowledge, and other special interests/hobbies) All tutors under the age of 18 and that are still attending school must be in good standing, and must maintain a "C/2.0" average with the local school district.

<u>(</u>	<b>GRADE LEVEL</b> Please check preferred gra		7 <sup>th</sup> -8 <sup>th</sup>	grade	$\Box$ 9 <sup>th</sup> -12 <sup>th</sup> grade	□ An	у
S	UBJECT AREA Please check preferred su	bject area(s)					
	Math	□ Writing	$\Box$ So	ocial Stu	idies/History	□ Science	e
	VAILABILITY – Please specify the day, t eek. Hours of operation vary between tutor si		would	like to v	olunteer. Tutor sessions	are for one (	1) hour, two days per
D	AYS (please check ALL that are convenient	): 🗆 Monday & Wednesd	ay 🗆	Tuesda	y & Thursday		ny Day
T	IMES (please check ALL that are convenier	$\square \text{ Anytime}$					
	$2:00 - 3:00$ $\Box 3:00 - 4:00$ $4:15 - 5:15$ $\Box 4:30 - 5:30$ <b>ites</b> (Mark ALL convenient sites by notin	$\Box 3:15 - 4:15 \\ \Box 5:15 - 6:15 \\ and 3^{rd} choices)$		$\Box 3:30 - 4:30 \qquad \Box 4:00 \\ \Box 5:15 - 6:15 \qquad \Box 5:30$			
5.	Site	Hours of Operation			Site		Hours of Operation
	August Knodt School 3939 EWS Woods Blvd., Weston Ranch	Monday – Thursday 3:30 - 6:30		Nile Garden School 5700 East Nile Ave., Manteca		Monday – Thursday 3:00 - 6:00	
	Brock Elliott School 1110 Stonum Lane, Manteca	Monday – Thursday 3:30 - 6:30		Ripon Elementary 509 W. Main S., Ripon			Monday – Thursday 3:00 - 6:00
	GECAC Ed Center (Reading HAP) 322 Sunwest Place, Manteca	Monday & Wednesday 3:45-6:00		Ripona School 415 Oregon St., Ripon		Monday – Thursday 2:00 - 6:00	
	George Komure School 2121 Henry Long Blvd, Weston Ranch	Monday – Thursday 3:30 - 6:30		Ri	ver Island Technology Aca 1175 Marina Dr, Lathro		Tuesday/Thursday 3:15 - 6:15
	George McParland School 1601 Northgate Dr., Manteca	Monday – Thursday 3:30 - 6:30 (HAP Tue & Thur)		Sequoia Elementary 710 Martha St., Manteca		Monday – Thursday 3:00 - 6:00	
	Gladys Poet Elementary School 1701 S. Central Ave., Tracy	Monday – Thursday 3:30 - 6:30			Shasta School 751 E. Edison St., Mante	eca	Monday – Thursday 3:30 - 6:30
	Golden West School 1031 N. Main St., Manteca	Monday – Thursday 3:15 - 6:15			Stella Brockman Schoo 763 Silverado Dr., Mante		Monday – Thursday 3:15 - 6:15
	Great Valley School 4550 Star Way, Stockton	Monday – Thursday 3:30 - 6:30			Tracy Family Resource Cer 35 E. 10 <sup>th</sup> St, Tracy	nter	Monday-Thursday 3:30-5:00 HAP 5:00-6:00 TEACH
	Joseph Widmer School 751 Stonebridge Ln., Lathrop	Monday – Thursday 3:15 - 6:15			Veritas School 1600 Pagola Ave., Mante	eca	Monday – Thursday 3:30 - 6:30
	Joshua Cowell School 740 Pestana Ave., Manteca	Monday – Thursday 3:15 - 6:15		Walter Woodward School 575 Tannehill Dr., Manteca		Monday – Thursday 3:15 - 6:15	
	Lathrop School 15851 South 5th St., Lathrop	Monday – Thursday 3:30 - 6:30			Wanda Hirsch Elementa 1280 Dove Dr., Tracy	ry	Monday – Thursday 3:30 - 6:30
	Lincoln School 705 E. Yosemite Ave., Manteca	Monday – Thursday 3:15 - 6:15					
	Manteca High School 450 E. Yosemite Ave., Manteca	Tuesday & Thursday 2:30-3:30 (High School) 3:30-5:30 (Reading HAP)					
	Melville S. Jacobson School 1750 W. Kavanagh Ave., Tracy	Monday – Thursday 3:30 - 6:30					

Monday – Thursday 3:30 - 6:30

Monday – Thursday

3:30 - 6:30

## **CONFIDENTIALITY:**

*Give Every Child A Chance* believes that to provide quality services, the parents' and child's right to privacy shall be considered paramount and shall be assured to the greatest possible extent. Therefore, all interactions between staff, volunteers and children will be considered confidential and privileged. Public disclosure of a volunteer or child's personal, financial or grading information for any purpose other than grant funding or general statistical reasons is forbidden unless expressly allowed in writing by the parent. Staff and volunteers of *Give Every Child A Chance* are required by law to report the following:

- CHILD ABUSE OR NEGLECT: Any incident or suspected child abuse will be immediately reported to the appropriate agency. Contact the Program Director.
  POTENTIAL HARM TO SELF OR OTHERS: Any case where a child is threatening harm to himself/herself or others will be immediately reported to the
- appropriate agency. Contact the Program Director

### FINGERPRINT & BACKGROUND CHECK POLICY:

- All individuals 18 years of age and older with direct contact with children must be fingerprinted and have a background check completed prior to participation. A completed application must be on file and clearance obtained by the Department of Justice before any individual will be allowed to participate.
- 2. All personnel with access to fingerprint and background information must have clearance through the Department of Justice.
- 3. All information is confidential with access limited only to those authorized by the Board of Directors. Authorized personnel include: Executive Director, Director of Community Outreach, Program Director, Administrative Assistant, Officers of the Board of Directors, and the Personnel Committee appointed by the Board of Directors.
- 4. All information will be kept for a minimum of two years after the last date of participation.
- 5. When discarding personal information, it must be discarded in such a manner so that no information can be obtained.
- 6. Personal records are to be kept in the office of the Corporation. Fingerprint and background information is to be kept in the appropriate file at the Corporate Office of *Give Every Child A Chance*.
- 7. During a background check if an item of concern is discovered, the following must be adhered to in order for participation:
- a. Clean criminal record for a minimum of five consecutive years.
- b. Pass a drug screening at the participant's expense.
- c. Pass local clearance by the Manteca Police Department.
- d. Provide at least two, verifiable character references.
- e. Absolutely no previous violent acts or crimes against children.
- *f. Approval by the Board of Directors on an individual case basis.*

### **Instructions for Fingerprinting by Live Scan:**

- 1. Complete Live Scan Request Form at the Give Every Child A Chance corporate office
- 2. Take form to Manteca Police Department located at:

#### LIVE SCAN HOURS: MANTECA ONLY!

<u>Monday</u> 2:00 PM – 4:45 PM <u>Wednesday</u> 2:00 PM – 4:45 PM

1001 W. Center St Manteca, CA 95337

3. You will be notified when your background check is completed

**<u>RELEASE</u>**: The Board of Directors would like to thank you for your interest in Give Every Child A Chance and hope that you understand the importance of our policy.

I, \_\_\_\_\_\_, understand that my participation as a volunteer/employee in the *Give Every Child A Chance* program is subject to the adherence of the strict guidelines established by the Board of Directors including but not limited to:

- 1. All contact with the children and parents involved in the Give Every Child A Chance program will be restricted to the tutor sites.
- 2. I certify that the foregoing information listed on this application is true and correct.
- 3. Tutors are prohibited from TRANSPORTING children or parents involved with the Give Every Child A Chance program in their personal vehicles.
- 4. Tutors must operate with another volunteer or staff member present for any given session.
- 5. Tutors working with children attending year round school, or who are attending year round school themselves; agree to continue tutor sessions during "intercession" or track breaks.
- 6. All volunteers 18 years of age and older must obtain fingerprint and background check clearance by the Department of Justice prior to participation.
- 7. It is a privilege and not a right to be involved in the Give Every Child A Chance program. Any misconduct or disobedience will result in **immediate** dismissal from the program.
- 8. I may be photographed and published in any material written for and approved by Give Every Child A Chance.
- 9. I agree to indemnify and hold harmless Manteca, Ripon, Banta, River Island and Tracy School Districts, GECAC, board of directors, employees/volunteers and all presenters and parties affiliated with the organization/program of any incident occurrence, injury or loss of property while attending and participating in GECAC programs no matter how the injury or loss was occurred. The aforementioned shall not be held responsible for the liability or expense for legal cost or medical treatment for my child; however, I do authorize the organizers, staff, EMT, physician, or hospital to administer emergency treatment or transport to a medical facility in the event of accident, illness, or injury. I understand that every attempt will be made to contact the parents in case of treatment. I give permission for my child's photo to be used in any promotion or advertisement in relation to the event. I am solely financially responsible for any cost and/or all indebtedness incurred as a result of any emergency and/or routine medical and/or surgical treatment and services prescribed by the attending physician for my child/ward, including all charges not covered by insurance. Any information written on this application will be used to match the tutor with an appropriate student.

\_\_\_\_\_Date:

\_\_\_\_\_Date: \_\_\_\_\_

#### Board of Directors reserves the right to refuse any applicant participation.

## Volunteer/Employee Signature:\_\_\_\_\_

Parent Signature:

(Required for volunteers under 18 years of age)

All Volunteers Must Attend Orientation!



# **Technology Device Waiver**

# This form is mandatory and must be completed for <u>each</u> student in program.

Give Every Child A Chance (GECAC) strives to be a welcoming and accommodating program for its students. We also strive to enable students to utilize, learn, and use current technology to create the best 21st Century learners. We do not discourage students from bringing their own technology to program however; we do ask parents sign a waiver of liability.

By signing below, the parent and the student recognize that any personal device brought into the GECAC After School Program or GECAC 1on1 Tutoring Program is the sole responsibility of the student. This includes (but not limited to) MUSD Panasonic E3 devices, cell phones, iPods, MP3 players, eReaders, tablets/iPads, netbooks, and laptops. The parent/guardian and student shall assume all risk with any personal device that is brought into program. GECAC will not be held responsible for lost, stolen, or damaged devices.

Student Name:		Grade:							
	Please Print								
Parent/Legal Guardian: _	Signature	Date:							
Your Time – Their Future!									
For more information, visit us at <u>WWW.GECAC.NET</u>									
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