

# Notification of Planned Community Involvement Activities

|                 |                   |
|-----------------|-------------------|
| <b>Student:</b> | <b>Principal:</b> |
| <b>School:</b>  | <b>Telephone:</b> |

*Please provide the information requested below about the community involvement activities in which you plan to participate.*

| Activity | Approved Activity |    | Estimated Number of Hours | Estimated Date of Completion | Location and Telephone Number | Supervisor's Name | Parent/Guardian Signature | Principal's Signature (if required) |
|----------|-------------------|----|---------------------------|------------------------------|-------------------------------|-------------------|---------------------------|-------------------------------------|
|          | Yes               | No |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |
|          |                   |    |                           |                              |                               |                   |                           |                                     |

Is each activity identified on the school board's list of approved activities?

If you checked "No", you must complete an "Addition to Approved Activities List" form and obtain written approval from the principal (the principal's signature above) before starting the activity.

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

*Note:* Personal information on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of administering the Community Involvement Program. Questions about this collection should be directed to the Freedom of Information and Protection of Privacy Co-ordinator.



# Community Involvement

## Request for Addition to the Board's Approved Community Involvement Activities List

*This form is only to be utilized if, in the opinion of the Principal, the activity identified by the student falls outside of the Board Approved Activities list.*

An application to add to the Board's list of approved activities must be completed by the applicant and submitted by the Principal to the Superintendent of Schools for approval. If a student commences an activity prior to receiving permission, and permission is subsequently denied, the activity or event will not be counted towards the students's community involvement requirement.

Name of Student: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_

Description of Activity: To ensure that this activity meets the Community Involvement criteria refer to information brochure "Questions and Answers About Community Involvement"

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Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_ Date: \_\_\_\_\_

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### ***For Office Use Only***

This activity meets the requirement of a Community Involvement Activity

Education Services Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

Superintendent of Schools: \_\_\_\_\_ Date: \_\_\_\_\_

Distribution:

Principal \_\_\_\_\_  
File \_\_\_\_\_



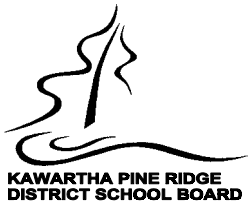
## Liability Insurance Coverage for the Community Involvement Program

Kawartha Pine Ridge District School Board is pleased to advise our Community Sponsors that students who are performing volunteer work for your organizations are protected by the school board's liability insurance, while they are performing their required forty hours of community involvement service. Community sponsors are also protected by the board's liability insurance for claims that arise out of our students' volunteer activities for your organizations.

For example, if a student, in the course of his/her volunteer duties, causes damage or injures a third party, and this results in a law suit against the student and the community sponsor, the board's insurance will protect both the student and the community sponsor.

Community sponsors will be responsible for ensuring that their liability insurance will protect them for their involvement in this program. As with other programs, such as "Take Our Kids to Work", the school board's insurance does not provide coverage for the negligence of the community sponsors.

Community sponsors should also be aware that, like job shadowing and other similar work-experience programs, students do not have accident insurance, nor Workplace Safety Insurance coverage through the school board. Though not required, **it is recommended that students involved in the program purchase Student Accident Insurance**. The school board expects the community sponsors to ensure that student volunteers are provided with safety instructions, and are trained and supervised to ensure a safe and mutually beneficial volunteer experience.



# Completion of Community Involvement Activities

|                 |                   |
|-----------------|-------------------|
| <b>Student:</b> | <b>Principal:</b> |
| <b>School:</b>  | <b>Telephone:</b> |

*Please submit this form to the school when you have completed 40 hours of community involvement activities, or when the principal requests it.*

| Activity | Number of Hours | Date of Completion | Location and Telephone Number | Supervisor's Name and Signature | Parent's/ Guardian's Name and Signature |
|----------|-----------------|--------------------|-------------------------------|---------------------------------|---|
|          |                 |                    |                               |                                 |   |
|          |                 |                    |                               |                                 |   |
|          |                 |                    |                               |                                 |   |
|          |                 |                    |                               |                                 |   |
|          |                 |                    |                               |                                 |   |
|          |                 |                    |                               |                                 |   |
|          |                 |                    |                               |                                 |   |

|                    |
|--------------------|
| <b>TOTAL</b> _____ |
|--------------------|

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

*For office use only*

" completion has been noted on the student's OST

\_\_\_\_\_  
Signature of school official

\_\_\_\_\_  
Date

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