



**Gilbert Christian Schools Agritopia Campus  
2020-2021 Parent Volunteer Agreement**



We are so thankful you have decided to become one of our parent volunteers! There are many different ways you can be helpful in the classroom and during special events. Thank you for getting involved and blessing our schools with your servant hearts!

Name: \_\_\_\_\_ Teacher Name(s): \_\_\_\_\_  
Please Print First & Last

**Please initial each statement. This lets us know that you are in agreement with what we ask of you while you volunteer on our campus. Thank you so much!**

\_\_\_\_\_ I understand that this agreement only allows me to volunteer on the Agritopia campus.

\_\_\_\_\_ I understand that each time I volunteer I must sign in at the front office upon arriving and leaving campus.

\_\_\_\_\_ I understand that I must wear a GCS polo with the provided name badge each time I volunteer. I understand that I cannot wear yoga/exercise pants to volunteer. Jeans/slacks/bermuda-length shorts, or skirts are all appropriate to wear with my GCS polo or on Friday, GCS Spirit Shirt.

\_\_\_\_\_ I understand that I should always have my name badge where it is visible, on the front of my polo. If I do not yet have a badge, or have forgotten my badge, I understand I must ask the front desk for a visitor badge.

\_\_\_\_\_ I understand that I must knock before entering the classroom in order to gain a non-disruptive entry.

\_\_\_\_\_ I understand that the teacher may assign me tasks based on his/her needs, and that these tasks may vary.

\_\_\_\_\_ I understand that if I am unable to make a scheduled volunteer time, I will notify the teacher ASAP.

\_\_\_\_\_ I understand that as a volunteer, I represent GCS in our mission to partner with parents to prepare the next generation to impact the world for Christ. As such I agree to uphold the GCS culture while on campus.

\_\_\_\_\_ I understand the GCS standard of conduct and agree to follow Matthew 18:15 in my interactions as a volunteer.

\_\_\_\_\_ I understand that failing to comply with this agreement will cause revocation of my ability to volunteer on campus.

\_\_\_\_\_ I understand that as a volunteer I may be privy to private or sensitive information about student learners and agree **to keep all information, conversation and knowledge learned, confidential**.

\_\_\_\_\_ I understand I will be subjected to a background check in order to volunteer at GCS.

\_\_\_\_\_ I understand that I must wear a mask at all times on campus when volunteering and agree to keep my mask on the entire time I am in the classroom and until I leave campus.

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

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