



VOLUNTEER CODE OF CONDUCT

THIS CODE OF CONDUCT APPLIES TO ALL PERSONS VOLUNTEERING WITHIN THE BURGMANN ANGLICAN SCHOOL COMMUNITY.

Volunteers are an important part of the Burgmann Anglican School community. They enrich a range of learning experiences for students and often provide valuable links to the wider Canberra community.

To assist the school to maintain a safe learning environment, as well as a positive and supportive one, volunteers are required to complete the **Volunteer Declaration** and to comply with the **Volunteer Code of Conduct**.

At Burgmann Anglican School volunteers will:

- Act in a manner that is supportive of the school's ethos and values.
- Observe similar standards of behaviour, dress and ethical conduct to that required of staff. This means to act lawfully, honestly and respectfully; performing your duties to the best of your ability.
- Observe confidentiality in respect to information gained through their participation as a volunteer.
- Observe safe work practices and follow instructions given by staff.
- Report any incidents or accidents to their supervisor.
- Treat students with respect and endeavour to build positive and affirming relationships with other in the school community.
- Be familiar with school policies and guidelines on relevant issues (depending upon your role).
- Work under the direction of a staff member and seek advice from staff whenever appropriate.
- Possess current **Working with Vulnerable People** registration.

Any breaches of this **Code of Conduct** will be referred to the Principal for appropriate action.

ACKNOWLEDGEMENT: This Code of Conduct was developed with reference to the ACT Education and Training **Code of Conduct for Volunteers**.

BURGMANN
ANGELICAN SCHOOL





VOLUNTEER DECLARATION

FOR VOLUNTEERS WORKING WITHIN THE SCHOOL, OR ASSISTING ON EXCURSIONS, CAMPS, CO-CURRICULAR ACTIVITIES, ETC.

I _____ would like to volunteer my services at Burgmann Anglican School. I have read and understood the Burgmann Anglican School **Volunteer Code of Conduct** and agree to abide by it.

I have provided proof to the school of my **Working with Vulnerable People** registration.

Signature: _____ **Date:** _____

Family Name:	First Name:
Daytime Phone:	Mobile Phone:
Email:	
Student(s) Name:	
(i.e: Mother / Father / Step Mother / Step Father / Grandmother / Grandfather)	
Relationship to the Student(s):	

I would like to volunteer my services in the following capacity:

(Please tick the areas you are hoping to volunteer in)

- In class activities**
- External excursions**
- Co-curricular sport coach / manager**
- Library helper**
- Professional Connections Program (PCP) ****
- School Fair**
- Other** _____

**** The Professional Connections Program (PCP)** provides an opportunity for students to connect with community members who have considerable experience in a particular career, profession or industry. The PCP aims to support Senior School students make informed and educated career decisions as they prepare for their future careers and life after school.



VOLUNTEER DECLARATION

STAFF MEMBER TO COMPLETE:

I have sighted the **Working with Vulnerable People** registration card for this person and a copy of both sides of the card is attached to this form.

Working with Vulnerable People registration details:

Registration Card Number: _____	Expiry Date: _____
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Staff Name (print): _____

Position: _____

Signature: _____ **Date:** _____

FOR OFFICE USE:

Approved by (print): _____

Signature: _____

WWVP Registration Details Recorded in Synergetic: _____

WWVP Registration Review Date: _____