



**PORTAGE LA PRAIRIE SCHOOL DIVISION**  
535-3rd Street N.W., Portage la Prairie, Manitoba R1N 2C4  
Telephone (204) 857-8756 Fax (204) 239-5998

**SCHOOL VOLUNTEER REGISTRATION**  
*Parent: to be completed each time your child changes schools*  
*Community Volunteer: to be completed once per year*

SCHOOL: \_\_\_\_\_

SURNAME: \_\_\_\_\_ GIVEN NAMES: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_  
Residence Business

**HAVE YOU VOLUNTEERED PREVIOUSLY, IF SO, WHERE AND IN WHAT AREAS?**

\_\_\_\_\_

**AREAS OF INTEREST:** ( E.g., office work; classroom helper; coaching; supervising field trips, etc.)

\_\_\_\_\_

**SPECIAL SKILLS/TRAINING:** (E.g., second language; music; art; coaching certificate, nursing, etc.)

\_\_\_\_\_

**TO BE COMPLETED BY VOLUNTEERS WORKING WITH STUDENTS UNDER SPECIAL CIRCUMSTANCES**

If you are working with or supervising students **independently**, e.g. coaching, assisting students in isolated locations, supervising students on extended field trips, or helping in other situations outside of the immediate supervision of staff, Board Policy requires the completion of :

1. A Provincial Child Abuse Registry form (attached)
2. A Criminal Record Check (attached)
3. Reference Checks

**CHARACTER REFERENCES: (please list the name and phone number of two references)**

Name	Phone Number	Comments (for office use only)
1)		
2)		

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

\* Principals need to complete the information on the back of this form.

**PORTAGE LA PRAIRIE SCHOOL DIVISION**  
**Section I: Instructional Program**



**IGE-E**

File IGE-E

This Volunteer Registration Form is to be kept on file at the school (and a copy sent to the Division Office).

I hereby verify that the following checks have been completed:	Comments:
1. Reference Check	<input type="checkbox"/> Two (2) completed
2. Provincial Child Abuse Check (attached)	<input type="checkbox"/> Applied for <input type="checkbox"/> Received & Submitted Date:    Date:
3. Criminal Record Check (attached)	<input type="checkbox"/> Applied for <input type="checkbox"/> Received & Submitted Date:    Date:
4. Holds a valid driver's license	<input type="checkbox"/> Yes    License #: _____

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

**Disclaimer:** Any changes to this information must be shared with the Portage la Prairie School Division.