

Salmon School District No. 291

PERSONNEL

5720F

VOLUNTEER -- AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I, _____, am volunteering my services to assist
_____ of the Salmon School District #291, with the
following assignment:

These duties will be performed at _____ for the following
period of time (not to exceed one school year). _____

I understand that I am excluded from the definition of “employee” under the appropriate state and federal statutes, and will not be compensated for my volunteer time. I agree to follow District policies and procedures at all times. This agreement may be terminated at any time by myself, my supervisor, the building principal, or Superintendent.

Volunteer Signature

Date

Supervisor Signature

Date

Building Principal Signature

Date

Reviewed: 091619