

The Bergens

Meadow Campus 1928 Hiwan Dr. 303-982-4890

Valley Campus 1422 Sugarbush Dr. 303-982-4964

Community Volunteer Confidentiality Agreement

As a community volunteer assisting at the Bergens you have been authorized by the Principal to act as a school official subject to the direction and control of the school's administrators and teachers. As a school official, you may under limited circumstances have access to student education records in connection with your authorized duties. Student education records include all records, files, documents and other materials that contain personally identifiable information on any student, as well as the personally identifiable information grades).

By signing below, you agree to maintain the confidentiality of all student education records which you generate and to which you are given access as an authorized community volunteer. This means that you agree not to disclose student education records or personally identifiable student information in such records to any person other than the school administrator(s) and/or teachers(s) with whom you are working. You understand and agree that your failure to maintain the confidentiality of all student education records to which you are given access may disqualify you from further service as a community volunteer in the Jefferson County Public Schools.

Dated this day of	, 20
Volunteer's Signature	
Student's Name	Teacher



The Bergens

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Volunteer Release

In consideration of my voluntary participation	n in any school related activity,
lherebySchool, t successors, heirs, assigns, directors, officers, e representatives, from any and all actions, car damages, costs, attorney fees, judgments, lie known or unknown, suspected or unsuspecte matters that could have been raised in an ac aforementioned activity in which I have elec	the Jefferson County School District and their/its mployees, supervisors, agents, attorneys and uses of action, claims, demands, losses, ens, indebtedness and liabilities whatsoever, ed, past, present or future, with regard to all ction on the merits regarding the
Dated this day of	, 20
Volunteer's Signature	<u>-</u> :
Student's Name	Teacher