

Portage Learning Centers  
**Volunteer Information Form**  
(One-Time)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Are you over 18 years old? Yes [  ] No [  ]

Do you have a child enrolled in a PLC Child Development Center? Yes [  ] No [  ]

Have you ever been convicted of a crime? Yes [  ] No [  ]

If yes, please explain: \_\_\_\_\_

In the event of an emergency contact:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**VOLUNTEER CONFIDENTIALITY STATEMENT**

I, \_\_\_\_\_ understand that all information regarding children, their families, PLC personnel, and job applicants is strictly confidential. As a PLC volunteer, I will honor this pledge of confidentiality. Whatever I may observe while volunteering (i.e. children's classroom behavior, children's eating habits, etc.) is confidential. Under all circumstances I will protect the right of confidentiality for all PLC families. If I have any questions or concerns about something I have seen, I will contact Portage Learning Centers' main office at (330) 297-7795.

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

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

Witness: \_\_\_\_\_

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

PLC does not discriminate on the basis of race, color, religion, sex, disability, age, political affliction, or national origin.

Revised 08/25/2010