



## Volunteer Agreement

Please complete the following (please print):

Campus \_\_\_\_\_

Volunteer Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Email \_\_\_\_\_

I \_\_\_\_\_ have been retained by the Plano Independent School district as a volunteer for the school year of (date) \_\_\_\_\_.

I agree to abide by the rules regarding confidentiality of student records and student information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### ACKNOWLEDGMENT

This Volunteer Agreement was acknowledged before me  
by the said \_\_\_\_\_ on this the \_\_\_\_\_ day of  
\_\_\_\_\_, 200\_\_.

(Seal)

\_\_\_\_\_  
Notary Public in and for the  
State of Texas  
My Commission Expires: \_\_\_\_\_