

Volunteer Code of Conduct and Professional Ethics

All volunteers are required to understand and abide by the Codes of Conduct as set forth in the Federal Performance Standards 1302.90 (c)(1). The following standards specify:

1. I will respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion or disability.
2. Maintaining confidentiality is important to the success of our mission, our reputation in the community and the privacy of clients and staff. Information concerning classroom occurrences is confidential to the classroom. Teachers will convey any and all information to families as needed. If approached by members of the news media requesting information regarding Tri-County Head Start operations, I will refer requests to the CEO/Executive Director.
3. I understand no child shall be left alone or unsupervised while under my care. I will use positive methods of child guidance that do not engage in corporal punishment, emotional or physical abuse, or humiliation. In addition, I will not employ methods of discipline that involves isolation, the use of food as punishment or reward, or the denial of basic needs.
4. I understand no child/children may be removed from the presence of staff.
5. I have received the policy and understand that abuse and neglect of children is against the law. I know all staff and volunteers are required by law to immediately report suspected child abuse and neglect to Children's Protective Services.
6. I understand and will follow the Adult Behavior Expectation Policy set by Tri-County Head Start.
7. I understand I am to report known conduct violations to the supervisor or to the administrative office.
8. I understand this document shall be placed in the licensing box and violations of these codes shall result in no longer being able to volunteer.
9. I have received and reviewed:
 - a. Child Protective Services Policy
 - b. Discipline Policy
 - c. Adult Behavior Expectations Policy
 - d. Family and Community Volunteer Policy

I understand it is my responsibility to read and follow the Code of Conduct stated above.

Volunteer Name (printed) _____

Volunteer Signature _____ Date _____

Emergency Contact Information

Emergency Contact Name _____ Phone _____

Relationship _____ Allergies _____

Hospital Preferred _____