



VOLUNTEER INTAKE FORMS

P.O. Box 1820 223-10th Ave. N. Creston BC, V0B 1G0 ph. (250) 428-2296 fax 428-2297

Name of Volunteer: _____ Date: _____

CODE OF ETHICS

The *CDSCL Code of Ethics Policy Number 1.5* articulates general rules of conduct necessary to provide a high standard of service.

Each CDSCL employee or volunteer is expected to conduct him/herself towards individuals, fellow employees, volunteers and others in the manner outlined in the *CDSCL Code of Ethics Policy*.

By signing below, I agree to the following statements:

- As an employee or volunteer of CDSCL, I understand that respect courtesy and dignity are integral to successfully carrying out my duties.
- Knowing this, I understand and agree to keep all the principles of the *Code of Ethics* and I further understand that violation of this agreement in any way may result in my immediate dismissal from employment or volunteer services with CDSCL.
- THIS DOCUMENT will be part of my personnel/personal record and will remain in effect for the duration of my association with CDSCL regardless of position or location changes in employment or volunteer service and shall survive the termination or cessation of the above noted status.

Signature of Volunteer: _____ Date: _____

Signature of Parent if Volunteer under 18: _____ Date: _____

Signature of Witness: _____

CONFIDENTIALITY AGREEMENT

In accordance with Rights and Responsibilities' Policy Number 4.3, prior to the commencement of duties as a CDSCL employee or volunteer, all must have read the above aforementioned policy and signed the following:

- I hereby acknowledge that I have read CDSCL's Policy Number 4.3, "Confidentiality, Protection of Privacy and Disclosure of Information" and the principles therein are clear to me.
- I fully understand each person's right to have information concerning him or her treated in confidence.
- I understand that specific information will only be shared when deemed appropriate and that it will always be done with dignity and respect for that person and that I am to avoid unnecessary conversation regarding others and their affairs.

Signature of Volunteer: _____ Date: _____

Signature of Parent if Volunteer under 18: _____ Date: _____

Signature of Witness: _____

