



**West Balcatta**  
Primary School

# GUIDELINES FOR VOLUNTARY PARENT/COMMUNITY HELPERS

Parents and community members, who are voluntary helpers in classrooms, are at all times under the direction and supervision of the classroom teacher/s. The identification and selection of helpers is at the discretion of the teacher(s) concerned.

The following guidelines have been produced to ensure that all helpers understand the extent of their involvement and the legal implications for teachers.

1. All classroom management/discipline/behaviour matters are handled by the class teacher/s (including that of your own child/ren).
2. **Any observations and/or discussion about students in relation to their:**
  - **ability**
  - **standards of work**
  - **behaviour**
  - **learning difficulties and/or disabilities**
  - **personal matters**
  - **other related matters**

**MUST be regarded as ABSOLUTELY CONFIDENTIAL at all times.**

3. If a student you are assisting behaves in an unacceptable manner, you may politely ask for cooperation or seek help from the classroom teacher/s.
4. Be mindful of what you say in the presence of students and generally around the school and community.
5. Give praise to students frequently when appropriate.
6. Use of the staffroom is by invitation only, as it is the teachers' area for work preparation and professional matters.
7. Helpers on excursions are required to wear a school 'Supervisor' vest.
8. The attached **Confidential Declaration** is to be completed and submitted along with the tear-off slip below to the class teacher(s).

As a staff, we sincerely appreciate your help and support and hope you too enjoy working with the students and staff in this excellent school.

.....tear off.....

I have read and fully understand the confidential nature and obligations as a **parent/community helper** and **agree and guarantee** that the above guidelines are adhered to and that the school reserves the right to cease my help and support if the guidelines are breached.

Full Name \_\_\_\_\_ Child/ren's Name(s) \_\_\_\_\_ TA \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

# CONFIDENTIAL DECLARATION



Department of  
Education

DEPARTMENT OF EDUCATION  
151 Royal Street  
EAST PERTH WA 6004  
Telephone: (08) 9264 4111

## CONFIDENTIAL DECLARATION

This form is for persons who are not employees of the Department of Education.

Please place a tick in one of the boxes below.

(1)	I declare that I <b>do not have</b> any convictions, circumstances or reasons that might preclude my working with or near children.	<input type="checkbox"/>
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or

(2)	I declare that I <b>do have</b> convictions, circumstances or reasons that might preclude my working with or near children. The nature of these convictions, circumstances or reasons is outlined below. _____ _____ _____ _____ _____ _____	<input type="checkbox"/>
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I certify the accuracy of the above information. I am aware that I may be required to provide a police clearance if it is considered necessary to verify the information provided.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(BLOCK PRINT PLEASE)

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

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

School: \_\_\_\_\_