

UCHRA-VAN BUREN COUNTY HEAD START

Consultants, Contractors and Volunteers Code of Conduct

Please initial next to each statement that is true.

_____ *I will not use any form of emotional abuse, including public or private humiliation, physically abuse, use any form of verbal abuse against any child, volunteer, consultant or contractor including my own child while involved in any Head Start activity.*

_____ *I agree to refer to H.S. staff member in all matters regarding child discipline. I understand that the use of corporal punishment is expressly forbidden, that isolation cannot be used to discipline a child, that a child's movement cannot be restricted, (bind, tie, or tape on mouth), use food as a punishment or reward, use physical or outdoor time as a punishment or reward including my own child.*

_____ *I agree to report to staff immediately upon entering the building when providing consultant, contractual or volunteer services.. I will seek instructions from staff. I will adhere to the program policies, schedule, etc and support ongoing activities led by staff members, and I will follow through on specific request made to me by staff members.*

_____ *I understand that a volunteer does not replace a staff member and are never left alone with a child or children and that staff are responsible for the safe supervision of Children. I understand that it is strictly prohibited to take photos of any child other than my own while children are in the care of the program, I also understand that this means consultants, contractors and volunteer may not change diapers, clothing, or assist children with bathroom use including my own child and will not use toilet learning/training methods that punish demean or humiliate a child.*

_____ *I agree to reserve questions, comments, suggestions, or feedback concerning any aspect of the classroom or program until such time that these remarks can be made in an appropriate setting at an appropriate time and when I do not agree with program policies I will attempt to effect change through constructive action within the organization. I understand that it is the task of classroom staff to remain focused on children and that they will be unavailable to discuss child care issues while they are on duty in the classroom and will notify a supervisor immediately of any un-safe situations or a concern about professional behavior of staff, consultants, volunteers contractors .*

_____ *I will respect and promote the unique identity of each child, family, staff, consultant, volunteer, contractor regardless of gender, race, ethnicity, culture, religion, disability, sexual orientation or family composition and will not stereo type on any basis .Adhere to the program's confidentiality policies. Conduct myself in a manner that is becoming to the program. Speak and act only on behalf of the program when authorized.*

_____ *I understand that firearms, weapons, drugs, and alcohol are prohibited on the premises, program vehicles or at any head start related event. That at no time am I to remove head Start property. I will not violate the agency conflict of interest policy and use the program in any manner to promote political activity.*

I understand that my association with the Van Buren County Head Start classrooms is not a task to be taken lightly: that the well being of children and the quality of care that they receive is the highest priority of all members and I will therefore adhere strictly to the above guidelines, any violation is a cause for immediate termination of my services/privileges with the program. I have not been convicted of child abuse/neglect nor am I a registered sexual offender. My signature allows for the program to search and document any said convictions.

Signature: _____ Date _____

Print Name: _____ SSN: _____

Staff Signature _____ Date _____

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<https://docs.google.com/document/d/1F3d1ARTGxRPRvoEMTZKozJf3vbJUnp8htDefteq35s8/edit>