



Volunteer Application Form

Name: _____

Address: _____

Phone Number: _____ Secondary Phone: _____

Email Address: _____

Do you have a child(ren) in the school system? Please provide name(s) and school(s).

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Check all in the following list of items you would be willing to do:

- | | | |
|---|---|---|
| <input type="checkbox"/> Office or Clerical | <input type="checkbox"/> Assist in the Classroom | <input type="checkbox"/> Be a Cafeteria Monitor |
| <input type="checkbox"/> Be a Host/Greeter | <input type="checkbox"/> Read to Students | <input type="checkbox"/> Help in Any Way |
| <input type="checkbox"/> Arts/Crafts | <input type="checkbox"/> Tutor Students | |
| <input type="checkbox"/> Science / Book Fairs | <input type="checkbox"/> Chaperone Field Trips | |
| <input type="checkbox"/> Festivals/Special Events | <input type="checkbox"/> Carpentry/Handyman Tasks | |

If you are willing to tutor students what subject(s) is/are best for you?

Check the day(s) and time(s) you are available:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	_____	_____	_____	_____	_____
Afternoon	_____	_____	_____	_____	_____
Evening	_____	_____	_____	_____	_____

I have attended a volunteer orientation and/or viewed the volunteer orientation material and agree to abide by all the policies and procedures contained therein.

Signature

Date