WMAES VOLUNTEER APPLICATION
2023/2024

A COPY OF YOUR DRIVER'S LICENSE MUST BE INCLUDED WITH THIS APPLICATION

First Name: _____ Middle Name: _____ Last Name: _____

Previous names (i.e. maiden): _____ Race/Ethnicity: _____ Date of Birth: _____

Home Phone: _____ Cell Phone: _____

Address: _____

Emergency Contact: _____ Relationship: _____

Contact Phone #: _____ Alternate Phone #: _____

STUDENT(S) NAME: _____ GRADE: _____

Relationship to Student(s): _____

Please indicate what type of volunteer opportunity you are seeking:

_____ Academic Assistance (tutoring, classroom assistance, etc.)

_____ Non-Academic Support (playground supervision, office help, lunch program, etc.)

_____ Field Trip/Special Event (see below)

Days Available: _____

Times Available: _____

Please list any special skills or talents you would like to bring to your volunteer work:

_____

What grade level are you interested in volunteering for:

_____ PreK   _____ 3rd   _____ 9th - 12th

_____ TK/K   _____ 4th   _____ Specific Event: _____

_____ 1st   _____ 5th   Date of Event: _____

_____ 2nd   _____ 6th/7th/8th   ***Teacher(s): _____**

Signature: _____ Date: _____

Please submit this form and your driver's license to the office.

Approved applications will be valid for this school year ONLY.