



Partners in Education Program Community Volunteer/Mentor Application Form

Thank you for your interest in serving as a volunteer/mentor in the North East Independent School District. We need you and are excited to have you join us as a "Partner in Education." Please complete the following form and return it to the District Volunteer Coordinator.

Name: _____

I wish to volunteer/mentor at (school name): _____

Address: _____ Telephone: (h) _____ (w) _____

City/State/Zip Code: _____ (c) _____ (p) _____

Source: AARP/Senior Business Chamber of Commerce Military Installation University
Jewish Federation Newspaper Other (i.e. Service Organization/Club Name: _____)

Preference/Area of Interest:

- Working with: Individual Student Working with small groups
- Grade level preferred: (Kinder through 12th grade) _____
- Volunteer time available: daily weekly bimonthly monthly
- Preferred time of day (most schools open 7:30 AM – 4:00 PM): morning afternoon evening
- Number of hours available to volunteer: morning _____ afternoon _____ evening _____
- Preferred day(s) of week: Monday Tuesday Wednesday Thursday Friday any day

Special skills, interests, hobbies I am willing to share with students: _____

Previous volunteer experience (Type of service, location, length of service): _____

Would you be interested in working with a special needs student: Yes No

Education: _____ Degree(s): _____

Vocational or special training: _____

Foreign language(s) (speak): _____ (write): _____

It is understood that I am offering my services to the school without compensation and without any rights to health benefits in case of injury. I will be contacted and attend volunteer training sessions provided. I will check in at the office and sign in and out on each visit to the school.

signature of volunteer

In case of emergency, contact: (Name) _____ (Relationship) _____
(Home Phone) _____ (Work Phone) _____

FOR OFFICE USE ONLY:	
Date contacted: _____	Date assigned: _____
School assigned: _____	Position: _____
Contact: _____	Phone: _____

(Please complete both sides of this form. Thank you.)

Please indicate all areas in which you would like to serve as a volunteer/mentor in our schools. Please **circle** the level (elementary, middle school, high school, adult) if you prefer a particular age group.

Program/Area of Interest:

Age Level:

- | | |
|--|--------------------------|
| <input type="checkbox"/> Adult Literacy Tutoring | Adult |
| <input type="checkbox"/> Computers | Elementary, Middle, High |
| <input type="checkbox"/> KIN (Kids' Involvement Network -after school program) | Elementary, Middle |
| <input type="checkbox"/> Mentoring (one-on-one role modeling) | Elementary, Middle, High |
| <input type="checkbox"/> Office | Elementary, Middle, High |
| <input type="checkbox"/> PTA | Elementary, Middle, High |
| <input type="checkbox"/> School/Business Partnership | Elementary, Middle, High |
| <input type="checkbox"/> Speakers' Bureau | Elementary, Middle, High |
| <input type="checkbox"/> Special Talents (hobbies, interests) | Elementary, Middle, High |
| <input type="checkbox"/> Telephone | Elementary, Middle, High |
| <input type="checkbox"/> Tutoring | Elementary, Middle, High |
| <input type="checkbox"/> Other (please specify) _____ | Elementary, Middle, High |

Please explain your reasons for wanting to volunteer in our school district: _____

Reference:

For the safety of our students, please provide us with one reference (other than a relative).

Name: _____
 Address: _____
 City, State, Zip: _____
 Telephone: (Work) _____ (Home) _____

For the safety of our students, North East Independent School District requires permission to obtain the criminal history record of prospective school volunteers/mentors. Please complete the addendum (DPS clearance form) providing the necessary permission to conduct the criminal history record check. All information requested including birth date, drivers license, social security number, etc. must be provided. If you completed a DPS clearance form at another school, please indicate the school. A criminal history check will be conducted every three years.

School where DPS clearance form was completed: _____

Do you have any questions about serving as a volunteer in the North East Independent School District?

