

Condon School District

Volunteer Interest Form

Name:

Last

First

Middle (full name required)

Address:

City:

Zip:

Telephone #:

Home

Work

Message/Cell/Pager

E-mail address:

School/s for volunteer placement:

Student's Name:

Grade:

School:

Name:

Grade:

School:

Relationship to student:

(Please indicate area of interest)

Instruction

- General Classroom
- Computer
- Language Arts Tutor
- Mathematics
- Physical Education
- English Language Learners Tutor
- Vocational Education
- Special Needs Education
- Other _____

Library

- Clerical/shelving
- Storytelling
- Cafeteria**
- Lunchroom Facilitator
- Food Server
- Office**
- General Duties
- Telephoning
- Other**
- Volunteer Coordinator
- Playground

Special Projects

- Arts & Crafts
- Bulletin Board
- Calligraphy
- Display Case
- Drama
- Music
- Child Care
- Field Trips
- Fund-Raising
- Teacher Appreciation

I would be interested in being a presenter on these topics:

:

Name:

Relationship:

Phone:

Name:

Relationship:

Phone:

Primary Doctor's Name:

Phone:

Do you have a hospital preference? Yes No

Hospital:

Do you have a medical condition, or are you taking medication/s we should know about in case of an emergency? Yes No

If yes, please explain: