



Volunteer Application

Name _____

Address _____

City, State, Zip _____

Email _____

Home Ph _____ Cell Ph _____

Day(s) you would like to volunteer (*circle all that apply*):

Monday Tuesday Wednesday Thursday Friday Occasionally

Hours you are available:

Mornings from ____ to ____ Afternoons from ____ to ____

Grade(s) you prefer:

K 1st 2nd 3rd 4th 5th 6th Administration Outside Work

A specific teacher you would like to help: _____

A specific skill or activity you would like to share with a group (*anything! bridge, archery, Latin, etc*):

When are you able to start? right away after Labor Day other _____

Can you be expected: regularly sporadically other _____

Experience: Have you volunteered at Heritage prior to this year? Yes No

If not, please describe any experience you may have had working with children in a school, church or other organization: _____

Have you completed the background screening process? yes no in process

ALL VOLUNTEERS MUST SUBMIT AN APPLICATION, COMPLETE A BACKGROUND CHECK AND ATTEND A MEETING IN AUGUST

*If you are a new volunteer and/or have not had a background check within the past 3 years, please fill out the background check form and submit \$20 payable to **Heritage Academy**.*