

# puget sound community school

660 S Dearborn St • Seattle WA 98134 • 206.324.4350

Volunteer Application

Date \_\_\_\_\_

## VOLUNTEER INFORMATION

First Name \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Phone(s) Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Date of Birth \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Do you require any special accommodations in a work environment? Yes No

If yes, please describe. \_\_\_\_\_

## VOLUNTEER TYPE AND AVAILABILITY

\_\_\_\_ Tutorial Facilitator (i.e. math, history, drama, music, arts & crafts, etc.)

\_\_\_\_ Board Member

\_\_\_\_ Clerical / Non Academic Support (i.e. office support, library support)

\_\_\_\_ Driver (i.e. field trip)

Please indicate what days and times you have available. \_\_\_\_\_

\_\_\_\_\_

## VOLUNTEER REFERENCES

We take every reasonable safety precaution when placing volunteers in our school. In addition to completing a yearly Criminal History & Disclosure form, we ask that you provide us with the following information.

Are you currently employed? Yes No If yes, where? \_\_\_\_\_

Contact Name, Position and Phone \_\_\_\_\_

*Please note that you will be notified **in advance** of our intent to contact employment reference.*

Are you currently a student? Yes No If yes, at what school? \_\_\_\_\_

What is your area of study? \_\_\_\_\_

Is your volunteer work a requirement of your schooling? Yes No

If yes, please describe. \_\_\_\_\_

Have you been a volunteer before? Yes No If yes, where and describe your role. \_\_\_\_\_

\_\_\_\_\_

Please provide us with two character references.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_ Length of time known \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_ Length of time known \_\_\_\_\_