

Parent Volunteer Form

Student Name: _____

Volunteer Name: _____

Phone: _____ Email: _____

(Check all that apply)

Type of Volunteer Work:

- Read Aloud Volunteer
- Small Group Volunteer
- Tutor
- Help with grading, filing, sorting, etc...
- Special Events Volunteer

I'd like to volunteer:

- As often as possible
- Once a week
- Twice a week
- Once a month
- Once a quarter

I am available:

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

"I'd like to volunteer but I am not available during school hours. I would love to help in any other way possible."

Best time to Volunteer:

- Mornings
- After Lunch
- Specific Time: _____

I am not interested in helping.