



School District of Janesville
Community Involvement Program Volunteer Application

Please print clearly & be sure to fill out form completely

Date: \_\_\_\_\_

DOB \_\_\_\_\_

(mm/dd/yyyy)

Only fill out this form if you have been assigned to a Classroom, Field Trip, PTA Event or as a PTA Member.

Name: \_\_\_\_\_
(LEGAL FIRST) (M.I) (ALL KNOWN LAST NAMES)

Home Address: \_\_\_\_\_
(STREET) (CITY) (ZIP)

Telephone #: \_\_\_\_\_ E-mail \_\_\_\_\_

Child's name(s) and grade \_\_\_\_\_

Day/s Available... M, T, W, TH, F Time of Day Available \_\_\_\_\_ Current Employee w/ SDJ? Yes / No

Please check one of the following:

- Returning Volunteer from 20 \_\_\_\_\_ Must reapply every year
One time volunteer (Field trip, PTA events, one time event, guest speaker) No references needed at bottom
New volunteer - Be sure to list references at the bottom that can be reached during the day

Classroom to volunteer in / Teacher you are assigned to: \_\_\_\_\_

Field Trip you are assigned to: \_\_\_\_\_

PTA Member? Yes / No \_\_\_\_\_

School to forward application to: \_\_\_\_\_

My signature below authorizes the school district to conduct a criminal background investigation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

References: You must list name & telephone number of at least two people. References can be: volunteer coordinators, fellow volunteers, employers, supervisor, director of community organization, etc.

References should not be relatives.

Table with 3 columns: Name, Relationship, Telephone or email. Rows 1, 2, 3.

School forwarding this Application \_\_\_\_\_

TO BE COMPLETED BY DISTRICT OFFICE

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Not Approved: \_\_\_\_\_ Date: \_\_\_\_\_