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## **Good Neighbors Program**

Park City School District Community Education  
2700 Kearns Blvd (Park City School District Office)  
(435) 615-0209

# **Volunteer Application**

Thank you for your interest in volunteering with the Good Neighbors program! We are eager to place you with a student or group of students who will benefit from your enthusiasm, expertise, and interest in bettering the community. Please provide the following information on your skills, background, preferences, and how to reach you.

## **CONTACT INFORMATION**

<b>Today's date:</b>
<b>Full legal name:</b>
<b>Current address:</b>
<b>Email address:</b>
<b>Best phone number to reach you:</b>
<b>Occupation and work schedule:</b>
<b>Emergency Contact name, address, and phone number:</b>

## **SKILLS AND EXPERIENCE**

As a person who is volunteering your time, we want your experience to be a positive one, and match you as best as we can with our students' needs. A lack of volunteer experience or special skills does not affect your eligibility to be a volunteer. Please answer the following questions in 100-300 words here in writing or on a separate piece of paper.

**Why do you want to volunteer with the Good Neighbors Program?**

**What skills, interests, or resources do you have that qualify you for this position?** Include experience working with other cultures, learning/speaking a new language, working in IT/Computer Skills, writing, etc.

**Tell us about any experience you have volunteering with people.**

**Do you have any teaching experience? Tell us about any experience you have in teaching and instruction, in any subject.**

**How do you like to be supervised, supported, and rewarded as a volunteer?**

## **VOLUNTEER PREFERENCES**

We want to match you as best as we can with our students' needs. Please see our list of Volunteer Positions and Responsibilities to understand the full scope of work for each position. Please provide the following information on your volunteer preferences.

### **Two best days of availability:**

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

### **Primary times of availability:**

- Mornings (8 am - 11 am)
- Afternoons (12 pm - 4 pm)
- Evenings (5 pm - 8 pm)

- Saturday
- Sunday

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## **ADDITIONAL INFORMATION**

**How did you hear about our program?**

**Are you able to commit to at least 3 months of service?**

**Are you able to volunteer at least 1 session per week, at 1 hour per session?**

**Please list one professional reference with contact information:**

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### **HOW TO SUBMIT THIS FORM:**

You can EMAIL it to Alison Taylor: [ataylor@pcschoools.us](mailto:ataylor@pcschoools.us)

You can MAIL to: PC District Office - c/o Alison Taylor -2700 Kearns Blvd. Park City, UT 84060

You can drop it off at the District Office - main office for Alison Taylor.

**CONTACT FOR GOOD NEIGHBORS: Alison Taylor 435-615-0209**