



## Senior Project Volunteer Form

**A. Title:** Mr. Mrs. Ms. Dr.      **Name:** \_\_\_\_\_  
 (Please check appropriate title)  
**Organization:** (if applicable) \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone:** (Day) (\_\_\_\_\_) \_\_\_\_\_ (Evening) (\_\_\_\_\_) \_\_\_\_\_  
**Email address:** \_\_\_\_\_

**B.** Business members, community members, and educators with knowledge in the following areas are needed. Please **check** the areas in which you could serve as a panel member. Consider not only areas related to your profession, but also interests or hobbies.

<input type="checkbox"/> Agriculture & Natural Resources	<input type="checkbox"/> Hospitality & Tourism
<input type="checkbox"/> Architecture & Construction	<input type="checkbox"/> Human Services
<input type="checkbox"/> Arts, A/V Technology & Communications	<input type="checkbox"/> Information Technology
<input type="checkbox"/> Business & Administration	<input type="checkbox"/> Law & Public Safety
<input type="checkbox"/> Education & Training	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Finance	<input type="checkbox"/> Retail Wholesale & Services
<input type="checkbox"/> Government & Public Administration	<input type="checkbox"/> Scientific Research & Engineering
<input type="checkbox"/> Health Science	<input type="checkbox"/> Transportation Distribution & Logistics
	<input type="checkbox"/> Other _____

**C.** Please place a **check** by the panel session(s) in which you can participate.

<b><u>Destrehan High School</u></b>	<b><u>Destrehan High School</u></b>
<input type="checkbox"/> Thursday, December 17, 2015 7:05 AM - 11:15 AM	<input type="checkbox"/> Friday, December 18, 2015 7:05 AM - 11:15 AM

**D.** Please place a **check** if you have a son or daughter or you mentored a student presenting a Senior Project this fall.

<input type="checkbox"/> Yes, my child, _____, is a senior at DHS and will be presenting a project this fall.  <input type="checkbox"/> Yes, I mentored _____ at DHS and he/she will be presenting a project this fall.
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Please return this form as soon as possible. Slots will be filled as volunteer forms are received. Return forms to Laura L. Abbey. It can be faxed to 985-785-3196, mailed to 13855 River Road, Luling, LA 70070 or emailed to [labbey@stcharles.k12.la.us](mailto:labbey@stcharles.k12.la.us).

As your form is received, you will be contacted. **Please mark your calendar.** You will receive a confirmation letter one week prior to the presentations. Thank you!