

Today's Date:    /    /

## BSD2 C.A.R.E. Volunteer Application

The focus of the CARE Program will be on **reading, writing** and **math** assistance.  
**Please indicate your order of preferences** in the areas you are willing to work in (1, 2, 3)

\_\_\_\_\_ Reading (phonics, fluency, comprehension)      \_\_\_\_\_ Math (basic facts, time, money concepts)

\_\_\_\_\_ Writing (graphic organizers, journaling)    Other (name) \_\_\_\_\_

Do you speak other languages *besides* English? (Please Name) \_\_\_\_\_

How many days do you want to participate? \_\_\_\_\_ How much time can you give (1 hour minimum) \_\_\_\_\_

**Days/Times available:** Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ (early dismissal)

Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_

**School preferred, please circle:**    **No Preference**    Blackhawk Middle School    Johnson    Tioga

Grade(s) preferred: **No Preference** \_\_\_\_\_ PreK-2 \_\_\_\_\_ 3-5 \_\_\_\_\_ 6-8 \_\_\_\_\_

**Please fill out below information completely & print clearly:**

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

Mailing Address: (street) \_\_\_\_\_

(City) \_\_\_\_\_ (zip) \_\_\_\_\_

**E-mail address:** \_\_\_\_\_ **Birthday:** \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Returning Volunteer Y / N      Teacher's name: \_\_\_\_\_

**Where do you come from?**

\_\_\_\_\_ Community      \_\_\_\_\_ Neighboring Community      \_\_\_\_\_ Parent from District  
\_\_\_\_\_ District Employee      \_\_\_\_\_ Company Partner (name: \_\_\_\_\_)      \_\_\_\_\_ other

Hobbies and/or Interests \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ relation \_\_\_\_\_ Phone \_\_\_\_\_

**Office Use:** Placement : Teacher/Grade Level: \_\_\_\_\_

