

2025-2026 PARENT RESOURCE FORM

THE CENTER FOR CREATIVE LEARNING

Parents are one of our greatest resources. Please complete this form and return it to the CCL.

****Only one form required per family****

Father/Guardian's Name_____

Address_____

City, State, Zip_____

Occupation _____

Company _____

Phone _____ Cell _____

E-mail _____

Mother/Guardian's Name_____

Address_____

City, State, Zip_____

Occupation _____

Company _____

Phone _____ Cell _____

E-mail _____

Please check each area in which you would be willing to provide community service to the CCL.

☐ Volunteer in CCL Classrooms ☐ Serve as company liaison to the CCL

☐ Volunteer as guest speaker ☐ Host field trips at your company

☐ Career Fair ☐ High School Career Shadowing / Mentoring

Interests/Hobbies: _____

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Interests/Hobbies: _____

Please provide the names and grades of your children who attend this school:

Name	Grade
_____	_____
_____	_____

