**Southmont Elementary Volunteer Application**

Name _____

Telephone_____

Email _____

Have you completed a Davidson County Schools Background check within the past two years? _____ Yes _____No

List Your Child/Children at Southmont:

Name and Teacher

_____

**Please check all of the following areas you would be willing to work in:**

**___Assisting students in Reading**

**___Assisting students in Math**

**___Helping with learning projects in the classroom**

**___Helping in any area in the classroom**

**___PTO events/fundraisers**

**___Duty-free lunches for teachers**

**___Proctor/help with testing (this will be in May)**

**Volunteer availability: (Circle all applicable)**

**1. Days of the week available:**

Monday Tuesday Wednesday Thursday Friday

**2. Times available:**

_____AM (Please list) _____

_____PM (Please list) _____

_____I am available anytime between on the days I marked above.

**Please return your completed form to your child's teacher.**