Volunteer Application

THE ISLAND SCHOOL 135 First St W • Boca Grande, FL 33921 • Telephone: 941-964-8016

Information you provide in this application is public record subject to release upon request to any member of the public

Full Name:_____ Drivers' License #:_____

Address:_____ Gender: ☐ Female ☐ Male

City:_____ Home Phone:_____

Zip:_____ Cell Phone:_____

Birth Date:_____ Email (Optional):_____

Emergency Contact: _____ Home Phone:_____

Work Phone:_____

Personal and Reference Information

Educational Background: _____

Occupation or Retired:_____

Previous Volunteer / Mentor Experience: _____

_____

Volunteer Preference

Is there a particular type of volunteer work in which you are interested? *(Check all that apply)*

- ☐ Reader
- ☐ Individual Tutoring
- ☐ Small Group Tutoring
- ☐ Classroom Assistant
- ☐ Library Assistant
- ☐ Field Trip Chaperone
- ☐ Special Projects
- ☐ PTO Clubs (after school)
- ☐ Art Assistant
- ☐ P.E. Assistant
- ☐ Other: _____

I am most comfortable with:

- ☐ Art
- ☐ Math
- ☐ Reading
- ☐ P.E.
- ☐ Science
- ☐ Field Trips
- ☐ Projects
- ☐ PTO Clubs
- ☐ Other: _____

I prefer working with:

- ☐ Gr K-1
- ☐ Gr 2-3
- ☐ Gr 4-5
- ☐ Students of all ages

What is your connection to The Island School? _____

Is there a specific classroom you wish to work in? _____

Have you ever been convicted, pled no contest to, or had adjudication withheld in a criminal offense other than a minor traffic violation or are there any criminal charges now pending against you? *(Note: Operating a vehicle while intoxicated is not considered a minor traffic violation.)*

☐ Yes ☐ No

I certify that the information provided herein is true, complete, and correct to the best of my knowledge. I understand that misrepresenting the information may disqualify me from volunteering. I understand that I have no legal right to volunteer. I understand that the school administration maintains the right to place and dismiss volunteers. **In order for The Island School to complete the processing of volunteer applications, I understand a Sexual Offender Search will be conducted and, if needed, a criminal background check may be completed.** With limited exceptions, the information you provide in this application is public record subject to release upon request to any member of the public. Chapter 119, Florida Statutes.

Applicant Signature:_____ Date:_____

Please return the form to Jennifer Mattu at The Island School