

Volunteer Registration Form

Name: _____ Date of Birth: _____
 Mailing Address: _____
 Home Phone: _____ Email Address: _____
 Available Start date: _____ Certified in First Aid/CPR? YES NO
 Emergency Contact (Name, Relation, Phone): _____

1.) **Experience:** Please list any previous paid/volunteer experience with students.

2.) **Grade Preference** (circle all that apply):

PRIMARY (K-3) INTERMEDIATE (4-6) MIDDLE (7-8) HS (9-12)
 Broadwater Bryant Central Kessler Helena Middle Capital High
 Four Georgians Hawthorne Jefferson CRA Middle Helena High
 Jim Darcy Rossiter Smith Warren
 Ray Bjork Learning Center Peak/Gifted & Talented School Age Child Care
 Activities (Athletics, Music, Theatre, Speech/Debate) Instructional Materials Center
 Front Street Learning Center May Butler Center Other _____

3.) **Availability:**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Before School							
Morning							
Lunch							
Afternoon							
After School							
Special Events							

4.) **Areas of Interest** (circle all that apply):

Classroom/small group assistance Mentoring Tutoring Special Events
 Sporting Events Speech/Debate Guest Speaker Music Theatre
 Clerical Parent Council

Other: _____

Volunteer must complete form and comply with requirements for background check prior to providing any services for Helena School District. Form should be submitted to Human Resource 55 S. Rodney Street

5.) Child/Children's Name/School/Classroom (if applicable):

Name: _____ School: _____ Classroom: _____

Name: _____ School: _____ Classroom: _____

Name: _____ School: _____ Classroom: _____

Name: _____ School: _____ Classroom: _____

Name: _____ School: _____ Classroom: _____

Please answer:

Have you ever pleaded guilty to, or have you ever been convicted of any violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contendere/no contest (minor traffic offenses excepted)? _____ Yes _____ No

If Yes, describe in full (attach additional sheets if necessary. Answering 'yes' may not prevent approval. All circumstances will be considered.

I understand I will be working as a volunteer with K-12 students and know of no reason why I should not work in this capacity. I agree to fulfill the volunteer responsibilities outlined on the back of this application.

I affirm the information I have provided is accurate.

Signature

Date

To be completed by School Personnel.

School Contact will be: _____

____ *BACKGROUND* _____ *SCHOOL NOTIFIED*

