



Civicorps Elementary School Volunteer Application

Civicorps Schools offers 2 exciting ways to volunteer: 1) volunteering for a specific project or community event as a short-term volunteer or 2) making a two-hour per week commitment for six months as a weekly volunteer. This application is for the Civicorps Elementary School.

For information about volunteer services at the elementary school, please contact Alison Ross at 510-420-3701.

Contact Information

1. Your name: _____
- 2a. Mailing address: _____
- 2b. City: _____ 2c. State: _____
- 2d. Zip Code: _____
- 3a. Home telephone number: () _____ 3b. Cell phone number: () _____
- 3c. Work telephone number: () _____ 3d. Email address: _____
4. Gender: Male Female

Volunteer Preferences

5. Would you prefer to serve as a: (Please check one box only)

- Short-term volunteer (single project or community event only) (Go to Question #6)
- Weekly volunteer (2-hour per week commitment for 6 months) (Go to Question #7)
- Both (Go to Questions #6 and #7)

6. Would you prefer to volunteer at these events: (Please check all that apply)

- Harvest Festival (October)
- Showcase of Learning (June & December)
- Fix and Fun Day (Weekend event)

7. Would you prefer to volunteer in the Civicorps Elementary School by: (Please check all that apply)

- Helping in the classroom (e.g., literacy centers, helping students with math or reading, working in the art room)
- Supervising in the play yard
- Providing music/performing arts opportunities (e.g., leading a class)
- Assisting with gardening/landscaping
- Providing before-school care
- Providing after-school care
- Helping in the school office (e.g., administrative work)
- Performing odd jobs/handyman work
- Other (please specify) _____

Volunteer Schedule, Skills & References

8. Typically, what days/hours are you available to volunteer? Please make an "X" in the boxes representing your responses.

	<u>AM</u>	<u>PM</u>
Monday	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>
<u>Weekend Events</u>		
Saturday	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>

9. Total number of hours you are available to volunteer: _____ per Day Week Month (Check one response)

10. Please list any relevant special skills including language skills, knowledge or experiences below.

11. Occupation: _____

N/A

12. Are you a college student?

Yes

No (Go to Question #15a)

13. Name of school: _____

14. Location of school: _____

Please provide 2 references:

15a. Name: _____

Telephone number: () _____

Home Work Cell (Check one response)

15b. Name: _____

Telephone number: () _____

Home Work Cell (Check one response)

PLEASE RETURN YOUR COMPLETED APPLICATION BY MAIL OR FAX TO:

Alison Ross
Civicorps Schools
1021 Third Street
Oakland, California 94607
(510) 420-3703 (fax)