

Parent Volunteers

Student Name: _____

Parent/Guardian Name: _____

Relationship to Student: _____

Email: _____

Phone Number: _____

*Please check the boxes that you are interested in. Any help is greatly appreciated. Please see the back for our district policy for classroom volunteers.

- ☐ At home prep work: cutting, gluing, and collating.
- ☐ In class prep work: cutting, gluing, collating, filing, and pencil sharpening-you must be Volunteer I cleared. I will put out a calendar each month to sign up on when needed.
- ☐ In class small group work: you will run a small group during our language arts centers-you must be Volunteer I cleared. I will put out a calendar each month to sign up on when needed.
- ☐ Field trip chaperone: you must be Volunteer II cleared to sign up for a chaperone. Depending on the field trip we can only take a certain number, we will have a lottery if needed. As a chaperone you will be in charge of a small group.