

VOLUNTEER APPLICATION

Please print or type:

I. Name:

Last	First	SS#	DOB	Gender () M () F
Address		City		ZIP
Phone		Alternate Phone		E-mail

II. Current Employment:

Employer	Job Title		
Address	City	State	ZIP

III. In case of emergency, whom should we contact?

Name	Relationship	Phone
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IV. Education

Currently a student ()	Name of Institution	Major	Expected Grad. date:
Not a student ()	Highest Grade Completed:	Major:	

V. List previous volunteer or work experience:

VI. Please check the volunteer positions of interest to you:

School-based Programs

- Tutoring Abuse prevention education Literacy Tutoring Homework Club
 Mentoring ESL Tutoring Recreational
 Classroom Assistant Children's recreation leader Service Projects
 Fundraising and/or Marketing *Speaker for Career Day* *Administrative Support*
 One-time Events *Not sure, I'd like to speak with someone*

VII. List any special skills, talents or hobbies:

VIII. Subjects I'd be comfortable tutoring:

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IX. How did you hear about Communities In Schools? (CIS Web site, Public Service Announcement (station?), CIS Staff, CIS Board Member, Volunteer Fair, Partners In Education, University Professor (name?) or other Teacher (name?), Other)

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X. What motivates you to work as a volunteer with us?

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If you need volunteer hours for class credit, how many hours do you need? _____ By what date? _____

XI. Please indicate the blocks of time you have free to volunteer:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

How many hours per week do you wish to volunteer? _____

Length of Commitment? _____

XII. What age group(s) do you prefer working with?

- 6th-8th grade
- 9th-12th grade
- Adult

What age group(s) do you have experience working with?

- 6th-8th grade
- 9th-12th grade
- Adult

Would you prefer to work with students () in groups or individually ()?

XIII. What site or area of town would you prefer to work in?

*We hope to honor your preference, but cannot ensure placement at a particular site.

1 st choice
2 nd choice

How will you get to the school? _____

XIV. Are you bilingual? () Yes () No If yes, what language? _____

XV. Please list any special requests regarding your volunteer placement that you wish us to consider.

XVI. Have you ever been convicted of anything other than a minor traffic violation? () Yes () No
If yes, list all such offences and state, date, name of court, & disposition: _____

XVII. Please list three professional or work references with phone numbers who can vouch for your character and who can be reached during the workday. Please do not list any family members.

Reference	Relationship	Phone
1.		
2.		
3.		

XVIII.

I certify that I have made no misrepresentations in this application nor have I withheld information in my statements and answers to questions. I hereby give permission to Communities In Schools to perform a criminal background check with the Texas Department of Public Safety, the Wichita Falls Police Department, and any other local, regional, state, or national law enforcement agency. I hereby give permission for the results of that criminal background check to be shared with each of the local school districts in which I may serve.

Signature _____

Date _____

Volunteer Agreement Statement

As a volunteer for Communities In Schools of Greater Wichita Falls Area, I understand that I am a welcomed guest on the school campus. I am part of a team and play a vital part to the schools' program. I am a helpmate and a go between for the school, CIS and the community. Believing this, I agree to:

- Sign in and out upon entering and leaving the school campus
- Serve as an adult role model on the campus and be an encouragement to the children I work with and those who may observe me.
- Work under the direction and supervision of a member of the CIS and/or school staff. The relationship is to be one of mutual respect and confidence.
- Support teachers and not supplant them. Teachers are responsible for content and instruction in the classroom. I will be receptive to new ideas.
- Be dependable and on time. The students are looking forward to having me here. If I am not able to attend, I will notify the appropriate person of my absence.

- Be generous with praise and courteous with criticism.

- Have planning and evaluation periods with CIS staff and/or teacher. I will inform CIS staff of any problems that may occur.
- Lend a sympathetic ear to students and teachers. I will **KEEP CONFIDENTIAL** any information about students and teachers.
- Work within the rules of the schools, as set out by the principal and CIS personnel.
- Have **NO IN-PERSON CONTACT** with the student(s) or their family without permission from CIS staff/school principal.
- The volunteer understands that he/she is not to be considered an employee, agent or independent contractor employed by Communities In Schools or WFISD for any purpose. The volunteer acknowledges that he/she will neither accept nor claim salary or benefits of employment, including but not limited to insurance, retirement benefits, worker's compensation, travel expenses, or any other form of compensation of any kind. I may be serving in the capacity of a volunteer, tutor and/or mentor on the campus. As a volunteer, I will be working with CIS personnel or school staff. As a tutor, I will meet with students on the campus to provide extra instruction. As a mentor, I will meet with the student to serve as a listening, caring adult friend and a role model for that child.
- The volunteer understands that he/she has no actual authority to bind or represent the Organization with regard to third parties. Accordingly, the volunteer may not sign or enter into any agreement or contracts on behalf of Communities In Schools Of Greater Wichita Falls Area
- The volunteer acknowledges that the Organization shall have no liability for personal injury or property damage which may be suffered by the volunteer, unless such injury or damage directly results from the negligent act or omissions of state employees or authorized volunteers. Any and all negligence claims shall be expressly limited to claims approved by the state of Texas.
- The volunteer and the Organization agree that no person shall be subjected to discrimination on the basis of race, color, religion, sex, age, handicap, or national origin in the execution or performance of this Agreement.
- This agreement may be terminated at any time upon written notice of the volunteer or the Executive Director of CIS-GWF.

I will schedule my visits with the CIS staff. A CIS staff will supervise volunteers. Occasionally, a working relationship must be terminated either by the volunteer/tutor/mentor or CIS/school. If able, I will give two weeks notice when I am no longer able to serve. CIS/school will make every effort to extend the same courtesy to me. CIS reserves the privilege of terminating a relationship without notice if it is deemed necessary.

Confidentiality Statement

As a Volunteer/Mentor for Communities In Schools of Greater Wichita Falls Area I understand and agree to adhere to the CONFIDENTIALITY POLICY, which states that all students information, including grade reports, attendance reports, TAKS scores, service log notes and any other information obtained from the school or outside agency, is strictly confidential information. I understand the CIS case managed files will remain locked to insure the safety and confidentiality information. I understand that any information that is shared regarding the students will remain confidential except in the case of abuse/neglect or if someone reports the intent to harm to another person. I will then report to the appropriate agency according to the State law. I will also promptly notify the Campus Site Coordinator & Program Coordinator or Executive Director of such reporting.

Signature _____ **Date** _____

I have received the CIS Volunteer Orientation on _____ by _____
Date Staff Name

Volunteer Signature _____ **Date** _____

Application Accepted by and orientation provided by

CIS Staff Signature _____ **Date** _____