

Communities In Schools HELPING KIDS PREPARE FOR LIFE Volunteer Mentor Application

Name:	Date:		
Home Address:			
Street:	City:	State:ZIP:	
Home phone:	_ Work phone:		
Cell phone:	_ E-mail address:		
Best time to call:			
Emergency Contact:			
Name:	Phone:		
How often are you available to volunteer?			
Most volunteers commit to 30 minutes on	e day a week. Any time	you can give is appreciated.	
Once or more a week: M T W TH	F (circle which days you	ı are available).	
A few days every month: # Days available	e:		
Time of day when I can volunteer:		·	
Length of time I can commit to each visit:			
Do you prefer to work with: Individuals,	groups, or both		*
What grade level do you prefer: Elementa	ary, Middle school, or Hig	gh school.	1
If elementary, which school? North	th Hart, South Hart or Ha	rtwell Elementary.	
Please briefly describe your experience wo	orking with children:		
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Comments (anything else you would like t	to share about you!):		