



Independent School District 279  
Community Education & Services Division  
ESC, 11200 - 93<sup>rd</sup> Avenue N \* Maple Grove, MN 55369



# Volunteer Application Form

## BROOKLYN JUNIOR HIGH

School Year 2009-2010

### CONTACT INFORMATION

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Contact me at (\_\_\_\_) \_\_\_\_\_  home  work  cell

Email Address \_\_\_\_\_

Medical Emergency Contact \_\_\_\_\_  
(Name) (Phone) (Relationship)

### SCHEDULING INFORMATION

*Indicate your availability:*

Monday: hours \_\_\_\_\_ Thursday: hours \_\_\_\_\_

Tuesday: hours \_\_\_\_\_ Friday: hours \_\_\_\_\_

Wednesday: hours \_\_\_\_\_ notes: \_\_\_\_\_

*Indicate your areas of interest:*

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Art                  | <input type="checkbox"/> Dances            | <input type="checkbox"/> Picture Day            |
| <input type="checkbox"/> Book Fair            | <input type="checkbox"/> Fundraisers       | <input type="checkbox"/> RIF                    |
| <input type="checkbox"/> Conferences          | <input type="checkbox"/> Honor Roll Lists  | <input type="checkbox"/> Testing Escorts        |
| <input type="checkbox"/> Conference Potlucks  | <input type="checkbox"/> Lunchroom selling |   |
| <input type="checkbox"/> Craft Demonstrations | <input type="checkbox"/> Media Center      | <input type="checkbox"/> Any (open to anything) |

*Please list your school-age children:*

<u>Name</u>	<u>Grade</u>	<u>School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

### ADDITIONAL INFORMATION

Why are you interested in volunteering at this school? \_\_\_\_\_

YES, you have my consent to share this contact information with our parent groups.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please return this form to the BJH Volunteer Coordinator. Thank you!*