

Brookstone Schools

Volunteer Profile Form

Please Print

Name: _____
Last First Middle

Address: _____
Street City Zip

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____

Church attending: _____ Member? Yes No

What ways are you involved in your church? _____

Occupation: _____ Employer _____

How often are you available to volunteer? Once a week Every other week Once a month Periodically

Circle day(s) of week available: **M T W TH F**

What time of day are you available? Check all that apply

7:30 – 9:00 AM 9:00 – 11:00AM 11:00AM – 1:30 PM 1:00 – 3:00PM Other: _____

What area would you like to volunteer?

Classroom Lunchtime Playground/recess Library Office Tutor - *Subject(s)* _____

Volunteer recruitment/coordination Grant procurement Teacher appreciation/luncheons, etc.

Monthly student birthday recognition Clothes Closet Lunch Buddy BoxTops/Campbell's Labels

Other: (Example, "Teach art lessons", "Sponsor a field trip to...", "Help with development of promotional materials")

For the safety and welfare of our students we must ask the following questions:

Have you been convicted of a criminal offense? Yes No If yes, please explain:

Have you been convicted of child abuse or sexual abuse or been involved in any activities related to molesting or abusing children/youth? Yes No If yes, please explain:

I certify that all information provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration, and may result in my removal if discovered at a later date. I further agree that I have read and agree to abide by the policies stated in the Brookstone Schools Volunteer Handbook.

Signature: _____ Date: _____

Please return form to the Brookstone Office, 2461 Arty Ave., Charlotte 28208

You may want to include a \$25 contribution to Brookstone Schools to defray cost of background check.