

**APPLICATION FOR VOLUNTEERS**

Please complete the following information and return it to:  
Van Vleck ISD, Superintendent's Office, 142 S. 4<sup>th</sup> St. Van Vleck, Texas 77482

1. Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

2. What days of the week would you be available to work: (please circle): M Tu W Th F

Campus/Dept. preference, if any \_\_\_\_\_

3. Number of hours you can contribute to volunteer work weekly \_\_\_\_\_

4. What kind of volunteer work would you prefer? \_\_\_\_\_

5. Background and experience

Education \_\_\_\_\_

Special Skills \_\_\_\_\_

Experience \_\_\_\_\_

6. Please provide us with the names, addresses, and telephone numbers of three references we may contact, or provide us with letters of reference from the persons listed.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

I understand that the District may conduct a criminal history record check, and I have completed the addendum to provide the information needed to conduct such a check.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**OFFICE USE ONLY**

APPROVAL OF VOLUNTEERS

This is to verify that \_\_\_\_\_ (*volunteer's name*) is eligible for assignment as a volunteer. I have provided (*him*)(*her*) with an orientation to the procedures of the campus.

Date interviewed \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

Assignment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date