

Personal Information

Name Title: Miss/Ms./Mrs./Mr./Dr.
 Date of Birth M F
 Preferred name for SFSV ID badge
 Home Address
 City, State & Zip
 Telephone # This is a day evening
 Email
 Preferred Contact: Telephone Email
 Emergency Contact
 Telephone #
 Relationship to you: Family Spouse Friend

Are you currently volunteering in a school? Yes No

For office use only:

Date of Orientation: TB Result
 Interviewer: Ref: #1 Ref: #2
 CVS Photo ID
 ESR, # of hours Position Description
 Volunteer Snapshot
School
Teacher
Subject
SRC Code:
Data Entry Only:
 Constituent ID Number:
 ESR Attributes: OTCC OCAD
 OCDV OICE OCOM OSSV

Location of Service

Preferred neighborhood/school:
 Will go to any school where needed: yes no
 I am interested in volunteering a total of hours/week.

Transportation

BART Bicycle Car Muni Walk
 Other:

Hours Available

	Mon.	Tue.	Wed.	Thu.	Fri.
AM					
PM					

Preferred grade level: Pre-K K-2 3-5 6-8 9-12

Preferred activities - Please rank your top three choices

- | | |
|--|--|
| <input type="checkbox"/> Afterschool Program | <input type="checkbox"/> Music |
| <input type="checkbox"/> Art | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Classroom Assistant | <input type="checkbox"/> Physical Education |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Playground Activities |
| <input type="checkbox"/> College/Career Counseling | <input type="checkbox"/> School Leadership Organizations |
| <input type="checkbox"/> English Language Learners | <input type="checkbox"/> Science |
| <input type="checkbox"/> English/Language Arts | <input type="checkbox"/> Social Studies/History |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Handiwork | <input type="checkbox"/> Summer Program |
| <input type="checkbox"/> Language Class | <input type="checkbox"/> Special Education: |
| <input type="checkbox"/> Library | <input type="checkbox"/> Moderate/Severe |
| <input type="checkbox"/> Literacy | <input type="checkbox"/> Moderate/Mild |
| <input type="checkbox"/> Mathematics | <input type="checkbox"/> Technology |

