



Volunteer Registration Short Form

Legal Name _____
Last First Middle Familiar/Nickname

Home Address _____ City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____ Date of Birth _____

Preferred E-Mail _____

Place of Employment _____ Occupation _____

Work Phone (____) _____ Ext. _____ Fax (____) _____

Emergency Contact: _____
Name Phone Relationship

Age group with which you would like to work : ☐ Elementary School ☐ Middle School ☐ High School

Specific School: _____

Volunteer Type Check all that apply.	Availability Indicate days and times available.				Volunteer Activity Check all interests.
<input type="checkbox"/> Parent of child attending this school Child's name: _____		Morning	Afternoon	After-School/ Evening	<input type="checkbox"/> Tutor
<input type="checkbox"/> Business Volunteer Company name: _____	Monday				<input type="checkbox"/> Assist in Classroom
<input type="checkbox"/> Student Volunteer School: _____	Tuesday				<input type="checkbox"/> Room Parent
<input type="checkbox"/> Organization/Community/Church Name of organization: _____	Wednesday				<input type="checkbox"/> Parent Organization
	Thursday				<input type="checkbox"/> Mentor
	Friday				<input type="checkbox"/> School Activities
	Special Activity				<input type="checkbox"/> Help in Office
					<input type="checkbox"/> Site Council
					<input type="checkbox"/> Prepare Materials
					<input type="checkbox"/> Field Trip Driver

Do you speak a second language? ☐ Yes ☐ No If yes, what language? _____

Please note: All volunteers must complete a volunteer registration form. This signed form entitles the volunteer to injury benefits provided by Unified School District 259 and liability insurance while performing volunteer services (*Refer to Board Policy 2130*).

The original signed application is to be kept on file at the PTR Volunteer office at the Focht ISC so information can be included on the district volunteer database.

Signature _____ Date _____

Please complete all blanks for prompt processing.

Please return to:
 PTR Volunteer Support
 Focht Instructional Support Center
 412 S. Main
 Wichita, KS 67202
 (316) 973-5118