



Valley School District No. 070

3030 Huffman Road • Valley, WA 99181 • Ph: (509) 937-2791 • Fax: (509) 937-2691 • www.valleysd.org

Volunteer Application

Thank you for your interest in volunteering with Valley School District!

Please return this form to the attention of the school/program in which you would like to volunteer.

NAME _____ EMAIL _____

ADDRESS _____ CITY/ST/ZIP _____

PHONE _____ ALTERNATE PHONE _____

EMERGENCY CONTACT:

NAME _____ PHONE _____

Do you have a related child/children attending a Valley School District school/program? YES NO

Child's full name:

School:

Grade:

Please check any of the following areas of interest:

- | | | | |
|---|-------------------------------------|--|-----------------------------------|
| <input type="radio"/> Childcare/ECEAP | <input type="radio"/> Lang./Reading | <input type="radio"/> Tutor/Mentor | <input type="radio"/> Playground |
| <input type="radio"/> Kindergarten | <input type="radio"/> Science | <input type="radio"/> Program Asst. | <input type="radio"/> Library |
| <input type="radio"/> Elementary School | <input type="radio"/> Math | <input type="radio"/> Classroom Asst. | <input type="radio"/> Kitchen |
| <input type="radio"/> Middle School | <input type="radio"/> Music | <input type="radio"/> Athletics | <input type="radio"/> Field Trips |
| <input type="radio"/> High School | <input type="radio"/> Art | <input type="radio"/> Special Services | <input type="radio"/> Other _____ |

Please list special skills or talents: _____

First Aid Card/Exp. Date _____ CPR/Exp. Date _____ Food Handlers Permit/Exp. Date _____

Day(s)/time(s) you will be available: _____

VOLUNTEER SIGNATURE _____ DATE _____

<p><i>FOR OFFICE USE ONLY:</i></p>
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