

**BROWN COUNTY SCHOOL  
VOLUNTEER APPLICATION**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Daytime phone:** \_\_\_\_\_

**Complete home address:** \_\_\_\_\_

**Other names used (maiden, all married names, aliases):** \_\_\_\_\_

**School at which you prefer to volunteer:** SMS \_\_\_ BCES \_\_\_ BCMS \_\_\_ BCHS \_\_\_

(check all that apply)

**What volunteer tasks do you prefer to perform?** (check all that apply)

\_\_\_ Work with students

\_\_\_ Help teachers with academic duties that directly impact the students' education, such as creating flash cards or developing practice tests or study guides

\_\_\_ Provide lessons for a music class: (please list instrument)

\_\_\_ Help at a specific school activity/event: (please list at the end of this application)

\_\_\_ Other: (please list)

**Days of the week available:** (check all that apply)

Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_

**Time of day available:** (please be as specific as possible) \_\_\_\_\_

**Preferred length of volunteering:**

30 minutes \_\_\_ 1 hour \_\_\_ or

Morning (8 am-noon) \_\_\_ Afternoon (noon-3:00) \_\_\_

**Subject areas or grade level you prefer** (please specify teacher/class if preferred) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Person to be notified in an emergency:** (include name & phone number)

\_\_\_\_\_

**Do you have past experience working with children?** \_\_\_\_\_ If yes, please explain:

\_\_\_\_\_

**We will conduct a sex offender and violent offender state registry check and notify you by email of your approval.**