

Gulf Breeze Elementary School 2016-2017 Volunteer Application

**** PLEASE COMPLETE APPLICATION IN FULL AND PRINT LEGIBLY TO AVOID DELAYING APPROVAL PROCESS ****

<u>Volunteer Information</u>	<u>Student(s) Attending GBES in 2016-2017</u>
Name: _____	Name: _____ Grade: _____
Driver's License State and #: _____	Name: _____ Grade: _____
Phone: _____	Name: _____ Grade: _____
Email: _____	
Relationship to student: _____ <i>(parent/grandparent/other)</i>	

Personal Reference (must be a non-relative)

Name: _____ Phone: _____

PLEASE CHECK ALL AREAS IN WHICH YOU WOULD BE WILLING TO PARTICIPATE

- My child's classroom** (assisting teachers in class/attending class party)
- Art Room** (class volunteer/prep work/special projects)
- Cafeteria** (assist Kindergarten students at lunch)
- Media Center** (bulletin boards/special projects)
- Music Room** (special projects as needed)
- Athletics** (Running Club/ Bike Fest/Field Day activities)
- Math Superstars** (grades 1-3; review/teach lesson or grade papers for weekly math program)
- Guidance** (test proctor/assist with screenings)
- ACES** (ACES parents only; Space Camp, Expo, etc.)
- Reading Tutor** (assist GBE Reading Specialist with intensive one-on-one reading help)
- Front Office** (shredding/copying, etc.)
- Classroom Helper** (assisting student who need extra one-on-one help with reading/math, etc.)
- Yearbook** (assist with gathering photos, info, organization)
- School Pictures** (assist with picture day; pictures are taken 4 times per year)
- Book Fair** (Spring and Fall; assist with setting up and running the book fair)
- Science Events** (assisting with experiments and hands on activities)
- Hospitality** (provide food or beverage for PTA sponsored events when called)
- Boxtops/Soup/Coke labels** (collect, cut, sort, count)
- Birthday Cupcakes** (provide 2 dozen once per year for school wide birthdays when called/emailed)
- Beautification** (help with various gardening and landscaping projects on campus)
- Grants** (finding and writing grants for the various needs of the school)
- Other:** _____

Release Statement:

I understand that by signing this statement I am offering my services to the Santa Rosa County School System without compensation and without any claim to health benefits in case of illness or injury. I am aware that I must be recommended by the Gulf Breeze Elementary School Principal AND approved by the Santa Rosa County School Board. I am aware that I must also submit a background security form before I can be approved as a volunteer.

Signature _____ Date _____

Official Use Only Background Check _____ Office Approval _____ Entered _____ New or Returning

**** PLEASE COMPLETE REVERSE SIDE ****