

MSAD #50 Volunteer Program
Lura Libby School
2006-2007

Our school welcomes parent and community volunteers! There are many ways you can be involved in the education of our students depending on your interests and schedule. Please complete this form and return it to the school office. If you have any questions or comments, please contact the school office at 354-6464

The following information is used to build a database of volunteers and to provide another means for communication between school and home.

NAME: _____ DATE: _____

ADDRESS: _____ EMAIL: _____

PHONE: _____

IN CASE OF EMERGENCY PLEASE NOTIFY:

NAME _____ PHONE _____

YOUR CHILD(REN) NAME(S):

NAME _____ GRADE _____ TEACHER _____

Please check:

- Please include my number in a phone tree to be called to help with classroom and school events.
- I would be willing to make phone calls to other parents when the staff needs volunteer assistance.
- I would like to have any name on an e-mail list to receive school related information.
- I would like to receive information on volunteer events/opportunities

Which activities would you be interested in?

(Please Circle)

- | | | | |
|--------------------|---------------------------|---------------------------|-------------|
| READING | WRITING | MATH | COMPUTERS |
| SCIENCE | HISTORY | LIBRARY | BAKING |
| AT HOME PROJECTS | FIELD TRIPS | WEB PAGE DESIGN | LANDSCAPING |
| BOOK FAIRS | BOXTOPS FOR EDUCATION | FAMILY/SCHOOL ASSOCIATION | |
| HELPING NURSE | TEACHER APPRECIATION WEEK | | |
| ANNUAL THEME EVENT | ANNUAL SCHOOL FUNDRAISER | | |

Please describe any other interests you may have that you wish to share with students

PLEASE ALSO COMPLETE THE BACK OF THIS FORM>>>

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Your interests (continued)

Please describe any other areas of interest you may consider sharing with students (hobbies, careers, talents, travels)

Please let us know the days and times you are most likely to be able to volunteer:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
_____	_____	_____	_____	_____

REFERENCES: The schools of M.S.A.D. #50 strive to maintain a safe and caring environment. We ask all volunteers working directly with children to provide two personal references to whom you are not related.

CONFIDENTIALITY POLICY:

I understand that school volunteers work under the direction of a member of the school staff, within the guidelines set out in the volunteer handbook. If I have any questions about school policies or procedures I will address them to the staff member I am assisting.

I will discuss students and staff only with the staff member to whom I am assigned, or with the building principal, in support of M.S.A.D. #50's responsibility to assure confidentiality of their activities.

Signature of Volunteer

Date