



# VOLUNTEER INTEREST SURVEY

## PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL	PHONE:
			E-MAIL:
STREET ADDRESS			BEST TIME OF DAY TO CONTACT YOU:
CITY, STATE, ZIP			BEST WAY TO CONTACT YOU (PHONE OR E-MAIL?):
VOLUNTEER CATEGORY (CHECK ALL THAT APPLY): <input type="checkbox"/> PARENT/GUARDIAN <input type="checkbox"/> GRANDPARENT <input type="checkbox"/> COMMUNITY MEMBER <input type="checkbox"/> HIGH SCHOOL STUDENT <input type="checkbox"/> COLLEGE STUDENT <input type="checkbox"/> RETIREE <input type="checkbox"/> MEMBER OF MILITARY			

## HOW WOULD YOU LIKE TO HELP OUR SCHOOLS?

<b>CHECK THE OPPORTUNITIES THAT INTEREST YOU. PLEASE NOTE THAT CERTAIN OPPORTUNITIES MAY NOT BE AVAILABLE AT SOME SCHOOLS. DESCRIPTIONS OF OPPORTUNITIES CAN BE FOUND ON THE VOLUNTEER MENU.</b>		
<input type="checkbox"/> LITERACY TUTORING <input type="checkbox"/> MATH TUTORING <input type="checkbox"/> CLASSROOM SUPPORT <input type="checkbox"/> LUNCH BUDDIES <input type="checkbox"/> AFTERSCHOOL PROGRAM SUPPORT <input type="checkbox"/> MENTORING <input type="checkbox"/> COACHING <input type="checkbox"/> TRANSLATIONS (LIST LANGUAGES):	<input type="checkbox"/> LIBRARY ASSISTANCE <input type="checkbox"/> OFFICE SUPPORT <input type="checkbox"/> SCHOOL OR DISTRICT ADVISORY COMMITTEES <input type="checkbox"/> CULMINATING PROJECT JUDGE <input type="checkbox"/> EVENT SUPPORT <input type="checkbox"/> JOB SHADOWING	<input type="checkbox"/> PRESENTATIONS <input type="checkbox"/> SCHOOL BEAUTIFICATION <input type="checkbox"/> OTHER INTERESTS OR SKILLS (PLEASE LIST):
<b>WHICH AGE GROUP WOULD YOU LIKE TO WORK WITH?</b> <input type="checkbox"/> ELEMENTARY SCHOOL (K-5) <input type="checkbox"/> MIDDLE SCHOOL (6-8) <input type="checkbox"/> HIGH SCHOOL (9-12) <input type="checkbox"/> PREFER TO WORK WITH STAFF ONLY <input type="checkbox"/> NO PREFERENCE	<b>HOW OFTEN DO YOU WANT TO VOLUNTEER?</b> <input type="checkbox"/> WEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ONE-TIME EVENTS <input type="checkbox"/> OTHER (PLEASE DESCRIBE):	<b>DAYS AND TIMES YOU ARE AVAILABLE TO VOLUNTEER</b> DAY(S):  TIME(S):
<b>ARE YOU INTERESTED IN WORKING WITH A PARTICULAR SCHOOL? IF SO, PLEASE LIST SCHOOL(S):</b>		
<b>HOW DID YOU HEAR ABOUT CPSD VOLUNTEER OPPORTUNITIES?</b>		

PLEASE RETURN TO:  
HOLLY BOCCHI

CPSD FAMILY & COMMUNITY PARTNERSHIP COORDINATOR  
10903 GRAVELLY LAKE DRIVE SW, LAKEWOOD WA 98499

PHONE: 253-583-5043

E-MAIL: hboocchi@cloverpark.k12.wa.us