



Volunteer Information Form

Teacher/Staff _____

Hours _____

Name ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. _____

Last

First

Middle

Address _____

Street

City

Zip

Phone _____

Email _____

Location Preferences

Do you have children attending Hilton Elementary School? ☐ Yes ☐ No

If yes, please indicate below:

Teacher _____ Grade _____

Teacher _____ Grade _____

Teacher _____ Grade _____

Do you have specific training as a volunteer reading tutor? ☐ Yes ☐ No

Available times to volunteer (Please indicate below):

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning Hours					
Afternoon Hours					

Exceptions to available hours (ex: every other week, once a month):

Grade Level:

☐ K-2

☐ 3-5

Areas of Preference

(please select all that apply):

☐ One-to-One

☐ Reading

☐ Small Group

☐ Math

☐ Science

☐ Art

☐ Other:

☐ Library Volunteer

☐ Mentor

☐ Tutor

☐ Preparing Instructional Materials

☐ Other:

After completing this form, please add any **background material** such as special courses taken, areas of experience, or any information that may be helpful to this program in placing you in volunteer work, which will be a rewarding experience for you as a volunteer, thus, providing an enrichment program for the school. Please share this information below:

☐ By checking this box, I hereby allow Newport News Public Schools to perform a check of my background, as appropriate for the volunteer jobs in which I have expressed an interest. I understand that I do not have to agree to this background check, but refusal to do so may exclude me from consideration for some types of volunteer work.