



## Volunteer Application

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

TO APPLICANT: We appreciate your interest in Academy Prep. A clear and full understanding of your background and work history will aid us in placing you in a position that best meets your qualifications. Applicants will be considered without discrimination because of race, color, sex, age, religion, national origin, marital status, disability, or veteran's status.

**Please Print Clearly**

**Please Answer All Questions. Please attach resume to application form if available.**

Name \_\_\_\_\_  
Last First Middle

Telephone Number ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Present Address (Street, Apt. or Unit No.) \_\_\_\_\_

City / State / Zip \_\_\_\_\_ How long at this address? \_\_\_\_\_

Email address \_\_\_\_\_

In Case of Emergency Contact and Phone: \_\_\_\_\_  
Name

Relationship \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell or Home Phone \_\_\_\_\_

**Volunteer Interests** – Please check anything of interest:

<input type="checkbox"/> Tutoring	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Arts, Hobbies and Crafts (Music, Dance, Drama, Art)	<input type="checkbox"/> Office Support
<input type="checkbox"/> Teacher's Aide	<input type="checkbox"/> Study Hall Monitor	List Expertise _____	<input type="checkbox"/> Library/Media Support
<input type="checkbox"/> Field Trip Chaperone	<input type="checkbox"/> Room Parent	<input type="checkbox"/> Sports	<input type="checkbox"/> Quarterly Newsletter
<input type="checkbox"/> Presentations to Students	<input type="checkbox"/> Topics: _____	<input type="checkbox"/> Curriculum Design Support	<input type="checkbox"/> Donations & Resource Development Activities
		<input type="checkbox"/> After School Enrichment Activities	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Presentation to Teachers/Staff	_____
		Topics: _____	_____
		_____	_____

Please write your availability to volunteer by week days and times including Saturdays:

\_\_\_\_\_  
\_\_\_\_\_

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

Is there anything that would prevent you from performing in a reasonable and safe manner the activities? involved in the volunteer position for which you have applied? Yes \_\_\_ No \_\_\_ If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime other than a traffic offense, had adjudication of a crime withheld, pled *nolo contendere*, or are currently being charged for a crime not yet adjudicated? Yes \_\_\_ No \_\_\_ If yes, state the nature of the offense and the date that the event took place:

\_\_\_\_\_  
\_\_\_\_\_

## Education:

Location \_\_\_\_\_

Course of Study \_\_\_\_\_ Degree/Diploma \_\_\_\_\_

High School \_\_\_\_\_

## Employment:

Current Work Name & Address of Company (*Describe business type*)

\_\_\_\_\_  
Supervisor's Name and Phone Number \_\_\_\_\_

Previous Dates Employed: From \_\_\_\_\_ To: \_\_\_\_\_

Job Title & Company \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Reason Left \_\_\_\_\_

I certify that all the information on this application, my resume, or any supporting documents is correct, and I understand that any misrepresentation or omission of any information may result in disqualification from consideration or my termination as a volunteer. I understand that this application is not a contract. If assigned, I will be able to resign at any time for any reason. I also agree to work under the conditions requiring a drug-free workplace.

I authorize Academy Prep Center of Tampa, Inc., or their agents to investigate all statements contained in this volunteer application and/or resume. I further understand that a background check may be made. I hereby authorize my former employers, educational institutions or individuals named to furnish all information pertaining to my work or educational record. I release my former employers, educational institutions, supervisors, co-workers and references from all liability on account of furnishing information to Academy Prep or their agents. I further release Academy Prep Center of Tampa, Inc., or their agents, from any liability as the result of such contacts and background checks.

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this application to our Development/Volunteer Coordinator, Chris Humboldt, in person or at [chumboldt@academyprep.org](mailto:chumboldt@academyprep.org) or fax to 813.248.5602. If you have any questions, please call Mrs. Humboldt at 813.248.5600. Thank you!

Updated 2/15/06