Pittsburgh Public Schools – Department of Title Programs
341 S. Bellefield Avenue – Room 436, Pittsburgh, PA 15213
Phone: 412-622-3894 / Fax: 412-622-7921

In-Take Form for Volunteers

Please Print or Type All Information

Date: _____

Name: _____ Birth Date: _____

Address: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____ _____

Emergency Contact: Phone:

School Where You Would Like to Volunteer: _____

Name(s) and Grade of Children/Grandchildren in this School:

_____ Grade: _____

_____ Grade: _____

Background/Experience (interest, talents, previous volunteer experiences, foreign language spoken, etc.)

_____

Volunteer Area That Would Interest You:

___Tutoring ___Field Trip Chaperone ___Lunch Room ___ Clerical ___ Mentor
___Library ___Playground Helper ___Prepare Materials ___ Hall Monitor
___Other_____

Please Indicate Days and Times You Would Be Available:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
A.M.	A.M.	A.M.	A.M.	A.M.
P.M.	P.M.	P.M.	P.M.	P.M.

Volunteer's Signature_____

*** For District Use Only – Send Completed Form to Room 436 Administration Building***

_____Criminal Background Check Completed and is on File.
_____Child Abuse Clearance Check Completed and is on File.
_____Applicant Approved _____Applicant NOT APPROVED

School Assignment: _____ Date: _____

We Are An Equal Rights and Opportunity School District