### General Information

|  |  |  |
| --- | --- | --- |
| Name: | | Date: / / |
| Address: | Home Phone: | |
|  | Business Phone: | |
|  | Mobile Phone: | |
|  | Email: | |
| Birthdate (for background check): | | |
| Driver’s license number: | Other Names Used in the Past: | |
| Interest in (check all that apply):   * **Classroom assistance** (teacher prep, working with struggling students) * **Coaching** (teach in PE, lead an extracurricular team) * **Office/Administrative** (front desk) | * **Special Events** (baking desserts, providing decorations, taking photos) * **Teaching** (teach an elective, leading a seminar) * **Other**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| What days and times are best for you to volunteer? (*E.g., MWF, 8-11am*)  (*Please note: classroom tutors should be prepared to commit to one class period/week*.) | | |

### References

Please list information for a character reference we can contact who is not a member of your immediate family:

|  |
| --- |
| Name: |
| Phone: |
| Email: |
| Relationship: |

Please list information for a professional reference (or someone who has worked with you in a volunteer capacity) that is not a member of your immediate family:

|  |
| --- |
| Name: |
| Phone: |
| Email: |
| Relationship: |

### Questions

1. Why would you like to volunteer at Eastside Academy?
2. In what capacity do you see yourself volunteering at EA?
3. Describe your Christian experience/faith journey.
4. Please describe your ability to work effectively with at-risk youth, especially those who struggle with addiction.
5. Briefly describe your current professional situation.
6. Please list any current certifications you hold, as well as any special talents or hobbies you have.

