



Dear Applicant:

Thank you for your interest in volunteering with Communities In Schools of Baytown (CISB). Volunteers are the heart and soul of any organization. Your talents and commitment WILL make a difference in the lives of our students and their families.

The mission of CISB is to surround students with a community of support, empowering them to stay in school and achieve in life. We provide and coordinate services at the school campus in order to best meet the academic, physical and emotional needs of struggling students and to empower these students to remain in school and graduate. Volunteers help remove obstacles to learning by providing additional academic support (tutoring), supportive guidance (mentoring), cultural enrichment (participating on field trips), and career awareness. In addition, volunteers can also be instrumental in assisting with special one-time projects or administrative support. With a wide range of services, the possibilities are endless.

While we are excited about your desire to volunteer with Communities In Schools of Baytown, however a few steps must be taken prior to receiving a volunteer assignment. **ALL** CIS volunteers are required to do the following:

- Fill out an application (see below)
- Fax or email application to (281) 422-4495 or dchavez@gccisd.net.
- Attend a CIS volunteer orientation & training
- Pass a background check
- Have a healthy and enjoyable volunteer experience!

If you have any additional questions, please contact Diane Chavez at (281) 425-3304 or by email: dchavez@gccisd.net

Sincerely,

Michael Wilson, Executive Director for CIS Baytown



Communities
In Schools

Baytown

VOLUNTEER APPLICATION
2011-20112

DATE: _____

PERSONAL INFORMATION

NAME: _____
LAST FIRST M.I.

ADDRESS: _____
CITY STATE ZIP CODE

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____ EMAIL: _____

PREFERRED METHOD OF CONTACT: _____

AVAILABILITY and SPECIAL REQUIREMENTS

Example: school hours (8:30am-3:30pm) After school hours (3:30pm -6:00pm)

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

If you are using this as an intern experience, how many hours are you required to complete? _____

Do you have any physical limitations that might affect your work? If yes, please explain.

AREA OF INTEREST

WHAT AGE GROUP WOULD YOU LIKE TO VOLUNTEER WITH? Please circle all that apply.

Pre-School	Elementary School	Junior High School	High School	Parents
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IN WHAT CAPACITY WOULD YOU LIKE TO VOLUNTEER? Please circle all that apply.

Agency & Administration	Tutor	Mentor	Holiday Projects	Office Work	Special One Time Projects	Other
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If other, please explain. _____

CAMPUS PREFERENCE

WHAT CAMPUS DO YOU PREFER TO VOLUNTEER? Please circle all that apply.

Robert E. Lee HS	Ross S. Sterling HS	Goose Creek Memorial HS	Peter Hyland Alternative Learning Program
Cedar Bayou Junior High	Gentry Junior High	Baytown Junior High	Highlands Junior High
Carver Elementary School	Ashbel Smith Elementary	Harlem Elementary	San Jacinto Elementary
Channelview Endeavor HS	Barbers Hill Primary		CIS Main Office – 607 W. Baker Rd. Baytown, Tx.

GENERAL BACKGROUND

WHAT IS THE HIGHEST LEVEL OF EDUCATION YOU HAVE COMPLETED?

HIGH SCHOOL	COLLEGE	GRADUATE SCHOOL
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PLEASE LIST ADDITIONAL TRAININGS, CERTIFICATIONS, OR PROFESSIONAL LICENCES BELOW.

ALL CIS VOLUNTEERS ARE REQUIRED TO COMPLETE A BACKGROUND CHECK.

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

IF YES, PLEASE EXPLAIN _____

ADDITIONAL QUESTIONS

HOW DID YOU HEAR ABOUT COMMUNITIES IN SCHOOLS BAYTOWN?

WHY DO YOU WANT TO VOLUNTEER WITH COMMUNITIES IN SCHOOLS?

BRIEFLY LIST VOLUNTEER EXPERIENCES YOU HAVE HAD IN THE PAST?

SIGNATURE: _____

EMERGENCY CONTACT INFORMATION

NAME: _____ **RELATIONSHIP:** _____

HOME PHONE: _____ **WORK PHONE:** _____

CELL PHONE: _____



Communities
In Schools

Baytown

For Office Use Only

Date Received:	PLACEMENT: SUPERVISOR: CONTACT INFORMATION: START DATE:
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NOTES:
