



Calvary Chapel Green Valley Christian Academy

Volunteer Application

We appreciate your interest in serving as a volunteer for CCGVCA. Please complete this application and return it to the school office. Thank you in advance for your love and dedication to this school and God's children.

Name: _____ Birth Date: _____

Contact Numbers: Home phone: _____ Cell phone: _____

E-mail address: _____

Specific days & times available: _____

Below are some areas where volunteers may be needed. Please indicate what you would be interested in:

___ Chaperone Field Trips (what grades: _____)

___ Driver for Field Trips (what grades: _____)

Please provide copies of your Driver's License and Auto Insurance card.

___ I have watched the driver safety video (please sign and date)

Signature: _____ Date: _____

___ Special events in classrooms (what grades: _____)

___ Help with grading papers (what grades: _____)

___ Aide teacher in classroom with reading groups, individual tutoring (what grades: _____)

___ Willing to volunteer wherever needed (what grades: _____)

___ Lunch room help ___ Recess help ___ P.E. help ___ Office help

Please list any talents/skills/interests that you might want to share with teachers/students:

Applicants Signature: _____ Date: _____