



Student Volunteer Form

Student Name (please print): _____

Current Grade (please circle): 7 8 9 10 11 12

Best Phone Number: _____

Can this number receive texts?

YES NO

E-Mail address: _____

VOLUNTEER Preferences

Ability to lift over 25 pounds: Yes or No

Ability to stand or sit for more than two hours: Yes or No

Ability to verbally offer direction to students or attendees: Yes or No

SIGNATURES AND AKNOWLEDGEMENT OF RESPONSIBILITIES

I understand that if I am selected as a volunteer for the Parent Teacher Committee within the Tiverton Middle School that I am obligated to:

- actively participate as defined by the volunteer coordinator to include events, fundraisers and group service projects during the Academic calendar year of 2017—2018.
- Act as a role model for the parents, teachers, students and all others in the Tiverton Community upholding virtues of positive character, leadership, scholarship, and service.

I further understand if selected as a volunteer for the Parent Teacher Committee, I must contact the organizer or PTC point of contact as soon as possible or at least 48 hours ahead of the scheduled time if possible to allow for the hours to be covered.

Thank you so much for volunteering in your community! We hope you find your volunteerism within the PTC to be a fun and rewarding experience!

Student Signature and Date

Parent Signature and date

All students will need to obtain a signature of recommendation from a current faculty member or Volunteer hour coordinator. Please have your sponsoring faculty member sign below with the understanding that they are recommending the above student as a qualified and capable volunteer within the Tiverton Middle School Parent Teacher Committee (PTC).

Faculty member signature and phone number

ALL HOURS WILL BE TRACKED ON THE REVERSE SIDE OF THIS FORM FOR STUDENT SUBMISSION. The TMS PTC Parliamentarian can assist with all aspects of volunteerism.

