



ST JOSEPH SCHOOL PARENT VOLUNTEER INTERESTS

Student(s) Name	Grade

Parent(s) Name	Phone	Occupation

1. Interests:

- | | |
|--|--|
| <input type="checkbox"/> preparing materials for class use
<input type="checkbox"/> chaperoning field trips/school events
<input type="checkbox"/> projects for school fundraising benefits
<input type="checkbox"/> playground repair/maintenance
<input type="checkbox"/> repairing classroom toys/equipment
<input type="checkbox"/> working on school social service project
<input type="checkbox"/> making phone calls
<input type="checkbox"/> website maintenance
<input type="checkbox"/> giving a brief program/demonstration of:
<input type="checkbox"/> occupation
<input type="checkbox"/> hobby
<input type="checkbox"/> playing musical instrument
<input type="checkbox"/> story telling
<input type="checkbox"/> dance
<input type="checkbox"/> other: <i>(please describe)</i>
_____ | <input type="checkbox"/> computer skills/practical
<input type="checkbox"/> computer skills/creative
<input type="checkbox"/> calligraphy
<input type="checkbox"/> artistic skills
<input type="checkbox"/> carpentry
<input type="checkbox"/> handyman skills
<input type="checkbox"/> organizational skills
<input type="checkbox"/> school library substitute
<input type="checkbox"/> taking photographs
<input type="checkbox"/> photocopying/collating
<input type="checkbox"/> classroom celebrations
<input type="checkbox"/> sewing
<input type="checkbox"/> baking/cooking
<input type="checkbox"/> playground supervision
<input type="checkbox"/> lunch room supervision
<input type="checkbox"/> other expertise: <i>(list)</i>
_____ |
|--|--|

2. Please call during the months of:

- | | | | |
|------------------------------------|-----------------------------------|--------------------------------|---------------------------------|
| <input type="checkbox"/> September | <input type="checkbox"/> December | <input type="checkbox"/> March | <input type="checkbox"/> June |
| <input type="checkbox"/> October | <input type="checkbox"/> January | <input type="checkbox"/> April | <input type="checkbox"/> July |
| <input type="checkbox"/> November | <input type="checkbox"/> February | <input type="checkbox"/> May | <input type="checkbox"/> August |

3. Our schedule is best suited to doing the job(s) checked above during:

- Days
 Evenings
 Weekends

Thank you for taking the time to complete this form.