

# Volunteer Start Form

# 1

**After the first activity**, complete this form and return it to your school coordinator or fax to 916.480.2773 or mail to above address.

Volunteer: \_\_\_\_\_ Current Email: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ School phone: \_\_\_\_\_ Start Date: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

## -- Classroom Visitation Schedule --

You must fill out date & time for each activity. (Revisions may be handled with your teacher, do not re-fax.) **Done in a Day** events require only one entry.

Activity	Date	Time	
#1			
#2			
#3			
#4			
#5			
#6			Middle/High School only
#7			Middle/High School only
#8			Middle/High School only

If you have questions or concerns, please call our Programs Staff at 916.480.2770