



**ST. LOUIS PUBLIC SCHOOLS VOLUNTEER APPLICATION**

As a volunteer, I agree to abide by the policies of the St. Louis Public Schools and UrbanFUTURE. I confirm that all my answers to the questions in the application are accurate and complete to the best of my knowledge. I understand that the acceptance of my volunteer services is contingent upon the accuracy, completeness, and acceptability of the information furnished. Permission is granted to the St. Louis Board of Education and UrbanFUTURE to verify all statements in this application. This permission includes the review of character references, and information from the Division of Family Services of the State Highway Patrol. In the event that there is an unfavorable response from references, the Division of Family Services and/or the State Highway Patrol, I understand that my services may be rejected by the St. Louis Board of Education and UrbanFUTURE. I further understand that UrbanFUTURE reserves the right to reject a volunteer at any time.

I understand that this information will be treated confidentially. I have read the above statement and accept the same as a condition of volunteering by the St. Louis Board of Education and UrbanFUTURE.

\_\_\_\_\_  
Signature Date

SCHOOL: FANNING MIDDLE SCHOOL MANN ELEMENTARY  
(Circle one)

PROGRAM: (please check one)  
 INSPIRE Mentor       IMPACT Tutor       Literacy Tutor (Day)       Explore! Volunteer

NAME: \_\_\_\_\_

PLACE OF EMPLOYMENT  
SCHOOL/ORGANIZATION \_\_\_\_\_ JOB TITLE/GRADE \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
(street)  
\_\_\_\_\_  
(city) (state and zip)

PHONE: \_\_\_\_\_ (home or cell) \_\_\_\_\_ (work)

EMAIL: \_\_\_\_\_

SSN \_\_\_\_ - \_\_\_\_ - \_\_\_\_ DATE OF BIRTH \_\_\_\_ / \_\_\_\_ / \_\_\_\_

.....

EMERGENCY CONTACT:

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

.....

- ◆ Are you related to a student(s) enrolled in SLPS? \_\_\_\_ Yes \_\_\_\_ No  
 Parent \_\_\_\_\_  Grandparent \_\_\_\_\_  Other \_\_\_\_\_
- ◆ Have you volunteered in SLPS in the past?  
 If yes: Year/s \_\_\_\_\_ School \_\_\_\_\_
- ◆ Educational background (level of completion)  
 High School  College  Graduate studies

Are you aware of any adverse findings in the criminal background check? \_\_\_\_ Y \_\_\_\_ N  
If so, please explain: \_\_\_\_\_  
\_\_\_\_\_

Are you aware of any adverse findings of abuse or neglect by the Division of Family Services?  
 Yes  No  
If so, please explain: \_\_\_\_\_  
\_\_\_\_\_

.....

Please provide names of three persons who will provide character references. (*Include name, address, city, state, zip code.*)

NAME	ADDRESS	CITY	ZIP
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

OR

Provide three VOLUNTEER REFERENCE CHECKS (included in this packet) filled out by persons who know you and are willing to attest to your good character.

Please list your experiences working with children (i.e. camp counselor, baby-sitter, etc.)

Dates	Experience	Ages of Children
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Media Release

UrbanFUTURE photographs activities and events to use in brochures, newsletters, and other media-related material to help promote our programs. I grant permission to UrbanFUTURE to use any photographs or videos in which I may appear to use at their discretion for promotional material.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I am electing not to sign this release.

**Mentors only** (Please provide copies of the following)

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Driver's License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

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Name of Auto Insurance Provider \_\_\_\_\_ Amount of Liability \_\_\_\_\_

**IMPACT Afterschool Tutors only**

What subject are you most comfortable tutoring? (Please check all the apply.)

Communication Arts       Math       Science       Social Studies       Other \_\_\_\_

Preferred day(s)       Monday       Tuesday       Wednesday       Thursday

What time and day can you be at the site? \_\_\_\_\_

**Please complete the following to help us track volunteer demographics. (Optional)**

Ethnic Background:

African American       Asian       Hispanic       White  
 Multi-Racial       Native American       Other

Marital Status:

Single       Married       Separated       Divorced       Widowed       Other

Children of your own?     Yes     No    Genders and Ages:

What do you use for Transportation?

Personal Car     Public Transportation       Other

How did you find out about UrbanFUTURE?

Radio       TV       Newspaper ad       Newspaper/Magazine article  
 UF Website       VolunteerMatch.com       Mentor.org       Snap211.org  
 Poster / postcard       Invited by a Friend       Neighborhood meeting  
 UF Staff visited my company       UF Staff visited my school/ organization       Other \_\_\_\_\_

<b>Office Use Only</b>	
Date recvd.	_____
Fee:	
<input type="checkbox"/> Cash	<input type="checkbox"/> Waived <input type="checkbox"/>
Check #	_____

**OPTIONAL INFORMATION**

Income level:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - 20,000      | <input type="checkbox"/> \$20,001 - 30,000 | <input type="checkbox"/> \$30,001 - 40,000 |
| <input type="checkbox"/> \$40,001 - 50,000 | <input type="checkbox"/> \$50,001 -60,000  | <input type="checkbox"/> \$60,001 +        |

Education level:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> GED             | <input type="checkbox"/> High School Diploma | <input type="checkbox"/> Some College        |
| <input type="checkbox"/> Trade School    | <input type="checkbox"/> Associates Degree   | <input type="checkbox"/> Bachelor's Degree   |
| <input type="checkbox"/> Master's Degree | <input type="checkbox"/> Doctorate           | <input type="checkbox"/> Professional Degree |



**Please include with application:**

- |   |  |
|---|--|
| <input type="checkbox"/> \$15 application processing fee                    | <input type="checkbox"/> Copy of Driver's License (Mentors only) |
| <input type="checkbox"/> UrbanFUTURE Background Check (pink)                | <input type="checkbox"/> Copy of Auto Insurance (Mentors only)   |
| <input type="checkbox"/> <i>INSPIRE</i> Mentor Questionnaire (Mentors only) | <input type="checkbox"/> CEC Contact Info form                   |



*The St. Louis Board of Education does not discriminate on the basis of race, color, national origin, sex, age, religion, veteran status, creed ancestry, sexual orientation, or disability in the admission of access to its programs and activities. Inquiries regarding compliance with Title VII, Title IX, ADEA, Section 504 of the Rehabilitation Act, The Missouri Human Rights Act, or ADA should be directed to the Human Resource Officer, 801 North 11<sup>th</sup> Street, St. Louis, MO 63101-1015.*



Thank you!

**For Questions:**  
 Volunteer Recruitment Manager, 314.776.3434  
**Please return to:**  
 UrbanFUTURE, Volunteer Application  
 3145 S. Grand Ave. Suite. A  
 St. Louis, MO 63118  
 or fax to 314.776.4885