



# VOLUNTEERS IN PROVIDENCE SCHOOLS

905 Westminister Street, Providence, RI 02903  
401-274-3240 • FAX 401-277-9090 • www.vips4kids.org

*For Office Use Only*

## Volunteer Application

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Work phone: \_\_\_\_\_

Email: \_\_\_\_\_

DOB \_\_\_\_\_ Car Availability Y \_\_\_\_\_ N \_\_\_\_\_

Language spoken (other than English): \_\_\_\_\_

### I am a:

- New Volunteer
- Returning Volunteer

### Program:

- In school Tutor
- After School / Saturday Tutor
- Power Lunch
- Mentor

Special Project: \_\_\_\_\_

NAME: \_\_\_\_\_ Date Rcv'd: \_\_\_\_\_

Vol. Number: \_\_\_\_\_ Req. Number: \_\_\_\_\_

Location: \_\_\_\_\_ Requestor: \_\_\_\_\_

Program: \_\_\_\_\_ Student: \_\_\_\_\_

Refs Sent: \_\_\_\_\_ Refs Rcv'd: \_\_\_\_\_

Training: \_\_\_\_\_ BCI: \_\_\_\_\_ FP: \_\_\_\_\_

### Are you a:

- Business Affiliate

Business Name: \_\_\_\_\_

- Community Member

- Current College student

College: \_\_\_\_\_ Yr. of Grad. \_\_\_\_\_

If applicable:

Diversity Instructor: \_\_\_\_\_

- Parent volunteering at child's school

Child's School: \_\_\_\_\_

- Current HS student

High School: \_\_\_\_\_

## Volunteer Availability

In School tutors volunteer for an hour or more between 8:15 and 2:30. After school volunteers generally volunteer between 2:45 and 6pm. Saturday tutors meet at the VIPS Learning Center. Please indicate all the times (ex. 8:15 -12) you are available to volunteer.

	Mon	Tues	Wed	Thurs	Fri
<b>Am</b>					
<b>pm</b>					

After school: VIPS Learning Center, Hope HS or library that is most convenient:

**Power Lunch: Weekly Reader**

**Alternate Reader in partnership with:** \_\_\_\_\_

**Grade Preference:**

**Elementary**  
K-2    3-5

**Middle**  
6-8

**High School**  
9-12

**Subject Preference:**

Literacy (reading / writing) \_\_\_\_\_ Math (level / type): \_\_\_\_\_ Library \_\_\_\_\_ ESL / Bi lingual \_\_\_\_\_ Special Ed. \_\_\_\_\_

Arts \_\_\_\_\_ Computers \_\_\_\_\_ Engineering \_\_\_\_\_ Science \_\_\_\_\_ Other \_\_\_\_\_

**New Volunteers Only**

All VIPS volunteers must be trained and undergo a criminal background check (BCI). In order to process your application, we need the following information.

Have you ever been convicted of a crime? Yes No  
If yes, please provide details

Have you lived in RI for less than one year? Yes No  
If yes, you must provide VIPS with a BCI from the state you lived in previously

**References**

References are required for all new VIPS tutors. Please list two individuals who have known you for at least two years. Please do not use family members as references.

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

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Returning Volunteers**

Prior School Placement: \_\_\_\_\_ Teacher: \_\_\_\_\_

Would you like to return to the same school? Yes No

Would you like to work with the same teacher? Yes No

Would you like to work with the same student? Yes No

Student Name: \_\_\_\_\_

**I give permission for my photo or my statements about the VIPS program to be used by VIPS in publications, press releases, etc.** Yes No

How did you hear of VIPS? \_\_\_\_\_

We always need extra help with fundraising, clerical work, web design, mailing and special projects.

Yes, I can help with \_\_\_\_\_

Notes / Comments:

*Thank you for becoming a volunteer!*