



**Project
READS**
ALLEN COUNTY
EDUCATION
PARTNERSHIP

Volunteer Application

Allen County Education Partnership (ACEP) is committed to protecting the children and workers who are involved in our programming. This primary screening form was developed to help us ensure that only the best possible volunteers are placed in ACEP programs. Applicants interested in a volunteer position with ACEP must complete this application, which will be used to help ensure that a safe and secure learning environment is provided for all who participate in our programming.

The information provided will be kept confidential.

Contact Information

Name _____ Nickname _____
(Identity may be confirmed with a driver's license or other photographic identification.)

Current Mailing Address _____

City _____ State _____ ZIP _____

Home Telephone _____ Work Telephone _____

E-Mail Address _____

Emergency Contact Name and Telephone Number _____

If under 18 years of age, please list your school and grade _____

Volunteer History and Prior Work with Youth or Children

Prior Volunteer Experience (please list program, agency and year):

Why are you interested in becoming a volunteer with ACEP?

Neighborhood Literacy Site Information

Site Selection (*see attached list*) _____

Are you able to volunteer at more than one site? Yes _____ No _____

If yes, please list additional site selection(s) _____

Personal Information

Date of Birth _____ Sex: Male _____ Female _____

Social Security Number _____ Driver's License Number _____

Ethnicity (circle one): African American/Black American Indian/Alaska Native
Asian/Pacific Islander Hispanic/Latino Multicultural/Biracial White Other

If you are under the age of 18, please skip this section and complete the form "References: Under 18 Years of Age".

Have you been convicted of a misdemeanor or felony in the last seven years? Yes _____ No _____

If yes, please give date and nature of offense: _____

Please note: A criminal history background check will be conducted on all volunteer applicants. A criminal record will not necessarily prevent an applicant from being a volunteer. A criminal record will be considered as it relates to specifics of the volunteer position for which you are applying. Personal references may also be requested.

Volunteer Statement of Commitment

As a volunteer working with Project READS, I agree to the following:

- I will provide my Social Security/driver's license number and signature, authorizing the release of information from state and/or local law enforcement agencies.
- I understand that I will not be allowed to start tutoring until the application process is completed. I will be notified when I can begin tutoring at a Neighborhood Literacy Site.
- I will honor my volunteer commitment of one hour per week for the course of the program year or the specific number of hours I have committed to volunteering for Project READS.
- I understand that I will be required to participate in mandatory volunteer training as part of the application process.
- I understand that tutoring sessions are generally one hour in length, and that there may be times when the Neighborhood Literacy Site coordinator may have valuable information to give me after a session, so I may be asked to stay an additional 10-15 minutes.
- If I will be late/absent to a Neighborhood Literacy session, I will call the site coordinator at least 2 hours before the start of the session.
- I give permission for my photograph to be taken during Project READS activities and to be used for publicity.

Volunteer's Printed Name _____

Date _____

Volunteer's Signature _____

<p>Please Return Application To: Allen County Education Partnership 709 Clay Street, Suite 101 Fort Wayne, IN 46802</p> <p>Questions? Please contact us: Phone: (260) 423-6447 Fax: (260) 426-8989 Email: abouteducation@abouteducation.org</p>
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