



1940 Traylor Blvd. Orlando, FL 32804
 Phone: 407-841-6607 – Fax: 407-749-0282
www.elcoc.org



Volunteer Application

Name: _____
 (First) (Middle) (Last)

Address: _____

 (City) (State) (Zip)

Phone: (Cell): _____ (Home): _____

Email: _____

Employer: _____

School/Class: _____ Hours Needed: _____

Birth Date: ____ / ____ / ____

Emergency Contact: _____

Emergency Telephone: _____ Relationship: _____

Program(s) of Interest

- Preschool Ambassadors Book Buddies Special Events

Volunteer Positions

- Ready Reader Early Literacy Liaison VPK Outreach Rep Book Buddy Event Volunteer

Availability

Days and times **available** to volunteer:

Best time to be in an early childhood program for Ready Reader is 9-11:30am or 3:30-5pm.

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|-------------------|--------|---------|-----------|----------|--------|----------|
| Morning (8-12pm) | | | | | | |
| Afternoon (1-5pm) | | | | | | |

Start Date: _____ End Date: _____

Prior Volunteer Work/Experiences:



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Talents, Languages, Skills and/or Hobbies:

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court?

No Yes.

If yes, please explain.

Have you ever been convicted of a crime relating to child abuse (sexual, physical or emotional) or neglect? No Yes

If yes, please explain.

The information provided in this application for volunteerism is true, correct and complete. If selected, any misstatement or omission of fact on this application may result in my release from volunteer services.

I understand that should my classroom volunteer hours exceed 10 hours per month, excluding students completing course requirements, I will be required to adhere to required background screening, including but not limited to, local criminal records check, FDLE/FBI fingerprint screening, and Florida Abuse Registry screening. I would be responsible for covering the fees associated with the screening.

Volunteer's Signature

Date

Please return original completed signed application to:

Jerry Brady
Volunteer Coordinator
PO Box 540387
Orlando, FL 32804

For questions please contact:

Jerry Brady, Volunteer Coordinator for ELCOC
Phone: (407) 377-1224
Fax: (407) 749-0282
Email: jbrady@elcoc.org

Christina Machado, Preschool Ambassadors
Phone: (407) 377-1218
Fax: (407) 749-0282
Email: vista@elcoc.org

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|-------------------------------------|
| OFFICE USE ONLY |
| Cleared to volunteer starting _____ |