



Cesar Chavez Foundation:  
**Si Se Puede Learning Center Volunteer Registration**

**VOLUNTEER CONTACT INFORMATION**

VOLUNTEER LEGAL NAME			
GENDER	AGE	DATE OF BIRTH	
STREET ADDRESS	APT #	STATE	ZIP
PHONE	EMAIL ADDRESS		

**EDUCATION/EMPLOYMENT BACKGROUND**

EMPLOYER/COMPANY	PHONE NUMBER		
HIGH SCHOOL/COLLEGE	EXPECTED/RECEIVED DEGREE	EXPECTED GRADUATION	

**AVAILABILITY**

*We hold our volunteers commitment to high expectations as our students rely on their consistency. Please complete the section below as accurately as possible.*

**Day(s) Available**

Monday  Tuesday  Wednesday  Thursday  Friday

**Hours Available/Week**

1  3  5  10  15  
 *Single Event Volunteer Only*

**ABOUT YOU**

How did you become interested in volunteering for the Si Se Puede Learning Center?

Are you volunteering as part of an organization, club, or class/school requirement? If so, please explain:

Do you have any relevant experience working or volunteering with children or the community? If so, please explain:

How do you feel this volunteer experience will benefit you personally and professionally?

## YOUR VOLUNTEER ROLE

We want to place you in a role that you enjoy and we can benefit from your strengths. Please place a check next to the ROLE you are most interested in.

**Homework Helper:**

Role requires volunteer to be extremely patient. Volunteer will need to be excellent at explaining math and English language concepts. (1 Hour Commitment)

**Snack & Recess Referee:**

Role requires volunteer to be self-disciplined, follow sanitary procedures, be comfortable enforcing playground rules and enjoy physical activity. (15 - 30 Minute Commitment).

**Class Organizer:**

Role requires volunteer to be very self-disciplined, excellent at organizing materials, enjoy decorating class environment and comfortable working individually and on a team. (Time Commitment Flexible).

**Activity Assistant:**

Role requires volunteer to love working directly with children of all ages. Volunteer must be very patient, express a highly enthusiastic attitude at all times and quick on their feet. (1 – 2 Hour Commitment).

**Deck Hand:**

Role requires volunteer to be a Jack or Jill of all trades, as you will be given multiple different tasks any given time. Volunteer must be comfortable in all described roles above. (2.5 – 3 Hour Commitment)

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## CONSENT FOR RELEASE OF PHOTOGRAPH, VIDEO AND INFORMATION

I hereby give permission for the Cesar Chavez Foundation: Si Se Puede Learning Center to use my photograph, video image, writing, voice recording, name and description of participation in newspapers, websites, radio, etc. I understand that, without my signature, my name and photograph cannot and will not be taken.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian (If applicant is under the age of 18)

\_\_\_\_\_  
Date

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## VERIFICATION OF STUDENT REGISTRATION INFORMATION

Registration is not valid without a verification signature and date. My signature indicates an agreement to accept policies and procedures established by the Cesar Chavez Foundation: Si Se Puede Learning. I verify that all information provided on this form is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

I, the legal parent/guardian of the signed applicant above, authorize their right to volunteer for the Cesar Chavez Foundation: Si Se Puede Learning Center.

\_\_\_\_\_  
Signature of Parent/Guardian (If applicant is under the age of 18)

\_\_\_\_\_  
Date

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## FOR OFFICE USE ONLY

\_\_ Application Completed    \_\_ Orientation Completed    \_\_ Background Check Completed    \_\_ TB Test Completed

Enrollment Date: \_\_\_\_\_ Application Reviewed by: \_\_\_\_\_