

ADULT BASIC EDUCATION • LEARNING EXCHANGE

Volunteer Application



Mission Statement

Metro South Volunteers supports adult learners through a network of caring volunteers dedicated to promoting literacy.

Volunteer Profile

Name (Please Print)				
Address	_ City		Zip	
Home Phone	_ Cell Phone	Work	Phone	
Email				
Emergency Contact Name			Phone	
GenderMF *Race		*Date of Birth		
*Optional - This information i	s requested by the Min	nesota Literacy Council	for MLC's annual report.	
Employment				
Employer		Position		
ast Employer		Position		
Education				
Years of Education		Degree (s)		
Additional Training				
Additional Skills, Interests or Expe	rtise (Foreign Langua	ges, Computers, etc.)_		
A 1 10.0 1 T C				
Additional Information	•	l as a volunteer before	? Yes No	
Have you taught ESL in the past? Y				
If yes, please specify:				
Have you ever attended a literacy v	workshop? Yes	No	If yes, which one (s)?	
	1		_ Date:	
Do you have any health problems o	r disabilities we show	ld know about when n		
Yes No If yes, 1		-		
10 11 yes,]	рісазе схріані			
Preferred Location:				
☐ Bloomington ☐ Eden Pr	airie 🗌 Edina	☐ Richfield ☐	Any Location	

Availability: Place a "Checkmark ✓" on the days and times you **ARE** available to volunteer?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM 9-12						
PM 12-5						
PM 5-9						

The type of volunteer placement that would interest	t me most:					
"I am interested in volunteering for Metro South Volunteers because" :						
Areas of Interest (If more than one, please priorit	ize 1,2,3 etc.)					
Volunteer opportunities that require a 12 hour training at the Minnesota Literacy	Volunteer Opportunities that <u>do not</u> require 12 hour MLC training:					
Council: ESL Collaborative Volunteer Teacher	ESL Classroom Assistant					
(small group tutoring at a community site)	Basic Skills (GED or Adult Diploma) Tutor					
Exceptions: Any volunteer tutor who began volunteering prior to July 1, 2006, or has a TEFL/TESL certification or current teaching license, or has 400 hours of documented ABE instruction	Computer Skills Tutor					
(volunteer or paid teacher).	Help Room Lab Tutor:MathWriting					
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Reference: (Co-worker, Past Employer, Clergy, Fr	riend, Neighbor, etc.)					
Please print and supply complete information.						
Name	_ Relationship					
Address	Phone Number					
	_ *Email					
Name	_ Relationship					
Address	Phone Number					
	_ *Email					
*Email address for reference is required						
Have you ever been convicted of a felony? Y If yes, comments (if any) :						
	nd correct to the best of my knowledge. I understand my acceptance as a volunteer nor does it obligate me to					
Signature	Date					
Oigiiatui C	Date					

PLEASE DO NOT WRITE BELOW THIS LINE

By Mail:	Community Education Camp 2575 West 88th Street Bloomington, MN 55431	ous.	
	Metro South Volunte		
Please return this a	pplication		
Training: Basic Skills		ESL	
	Reference Requested Reference Received		_
	Entered in Volunteer List D		Defense Democrated
	Entered in SiD		

The Bloomington Schools are an Equal Opportunity/Affirmative Action Educator and Employer