

**CAMDEN CITY PUBLIC SCHOOLS
CAMDEN, NEW JERSEY**

**APPLICATION
For
VOLUNTEER**

This application form is valid for one year from the date filed.

Mr.
Ms.
Mrs. _____
Last First M.I./Maiden Name

Present
Address _____
Street City State Zip Code

Social Security No. _____ Home Telephone () _____

Location/School _____ Grade _____

Activity _____ Check: Elementary _____ Secondary _____

Have you ever been convicted of a crime? Yes _____ No _____
If so, explain. (Attach detailed explanation to application)

In case of emergency please contact:

Name _____

Address _____

Area code () Phone Number _____

Signature _____ Date _____

RETURN APPLICATION TO PROGRAM ADMINISTRATOR/SUPERVISOR

Camden Board of Education is an equal opportunity employer.