HAND Volunteer Information

In an effort to keep accurate records of all our volunteers, the HAND Program requires that every volunteer complete the Volunteer Information form. Please complete the form and return it to me or your House Coordinator as soon as possible.

Thank you for working with HAND!
Judy Kokesh (jkokesh@fas.harvard.edu)
Public Service Program Administrator 495-3756

Name_____________________________________
House______________________
Year:__________
ID #_______________________________________
On Campus Address___________________________
Phone #_____________________________________
Permanent Address____________________________
E-mail Address_______________________________

Program(s) you will be working with:
_____ One-Shots
_____ Tutors
_____ Readers
_____ Mentors
_____ Sports
_____ Other (please list)

Do you check e-mail frequently? yes     no

Elementary school you will be working with: ______________________

How long are you committed to working with HAND?
______ Spring 2000     ______ Spring &Fall 2000

All participants must complete and return the following forms:
_____ CORI Check Forms
_____ Proof of TB Test (within past 3 months)

Additional forms required by Program:

Mentors:
_____ Permission Slip/ School Contact Form
_____ Mentor Questionnaire
_____ Contract

Readers/Tutors:

Tutors: Please indicate the days and times you are available to work in the Learning Centers. Learning Centers are open Monday - Thursday, between 2 and 4pm.

Readers: Please indicate the days and times you are available to volunteer. Readers may volunteer anytime during the school day or after school in learning centers.