

APPLICANT NAME (Last, First, Middle Initial)		
ADDRESS (Street, City, State and Zip Code)	DATE OF BIRTH TELEPHONE NUMBER	SEX: M F
	No. of Years at ADDRESS? E-MAIL ADDRESS	
NAME & ADDRESS OF EMPLOYER	WORK EMAIL & PHONE NUMBER	
ASSIGNED SCHOOL/LOCATION:	TOP 3 ACADEMIC SUBJECT AREAS:	
EXPERIENCE AND TRAINING (Special Skills/Ab	1	3
RESTRICTIONS, LIMITATIONS OF SERVICE (Hea	Ith Concerns, Medications, Allergies, etc.)  AVAILABILITY (Da	ays and Times)
IN CASE OF EMERGENCY, PLEASE CONTACT (N	ame, Relationship, Phone Number)	
an indefinite period. I understand that this waiver a	etary benefits for services rendered as a volunteer worker on a "with oplies only to remuneration (compensation) for specific services renderagreement may be canceled by either party upon written notice.) I	ered in the Educate America,
	Volunteer Signature	Date
	nerica Inc. (EAI) volunteer without-compensation volunteer subject basic and assignment specific orientations which have been docume	
	EAI Volunteer Program Manager - Appointing Official Signature	Date
	OFFICE USE ONLY	
1. APPLICATION:	2. RECOMMENDATION:	
3. INTERVIEW(S):	4. BACKGROUND CHECK:	
COMMENTS	NAME AND TITLE OF REVIEWER	DATE

EAI FORM HR-001-2024 JUNE 2024 NOTE TO ADULT VOLUNTEERS: Educate America, Inc. is a registered 501(c)(3) in the state of Virgnia. Our employees and volunteers come from diverse backgrounds. Our mission is to bridge the gap in educational opportunities and mentorship for low-income and underserved students from preschool through high school. Educate America, Inc. partners with public schools, parents, and community stakeholders to provide tutoring and mentoring programs that emphasize literacy, critical thinking and entrepreneurial-focused STEAM programs for Title I and underserved youth.

ADULT VOLUNTEER: If accepted, I agree to adhere to the policies and procedures of the Educate America, Inc. (EAI) Volunteer Program or Handbook, and to respect the confidentiality of information pertaining to the students, parents, volunteers and staff participating in our after-school and summer programs. If a student, staff member, volunteers and for parent is abusing, makes inappropriate

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Signature	

Date \_\_\_\_\_