



BEAVER DAM UNIFIED SCHOOL DISTRICT 2017-2018

HIGH SCHOOL VOLUNTEER SCHEDULE SURVEY

Name: _____

Mailing Address: _____

Email Address: _____

Phone #: _____ Cell Phone #: _____

ASSIGNMENT TYPE

- One-to-One PAL (Will be assigned to tutor and mentor one child - 100 needed)
- Substitute PAL (Will be contacted, as needed, to substitute for volunteers who have had to cancel a PAL session/s - 10 needed)

PAL LOCATION SCHEDULE, please indicate your 1st, 2nd and 3rd choices

- | | |
|---|--|
| <input type="checkbox"/> Jefferson (JE) | <input type="checkbox"/> Washington (WA) |
| <input type="checkbox"/> Lincoln (LI) | <input type="checkbox"/> Wilson (WI) |
| <input type="checkbox"/> Prairie View (PV) | <input type="checkbox"/> Middle School (MS) |
| <input type="checkbox"/> South Beaver Dam (SBD) | <input type="checkbox"/> Any school would work |

TIME SCHEDULE

- Before School (Morning Programs: MS 7-7:30; JE,LI,WA,WI 7:30-8:05; PV,SBD 8:00-8:35)
- After School (Afternoon Programs: MS 3:00-3:45; JE,LI, WA,WI 3:25-4:00; PV,SBD 3:45-4:15)
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DAY SCHEDULE, please check availability Note: Mondays are PM only

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Monday | <input type="checkbox"/> 2 days |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> 3 days |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> 4 days |
| <input type="checkbox"/> Thursday | <input type="checkbox"/> Other, please list: _____ |

GRADE LEVEL, if more than one choice, please indicate #1 as top choice

- | | |
|------------------------------|--|
| <input type="checkbox"/> 2nd | <input type="checkbox"/> 7th |
| <input type="checkbox"/> 3rd | <input type="checkbox"/> 8th |
| <input type="checkbox"/> 4th | <input type="checkbox"/> ANY Elementary |
| <input type="checkbox"/> 5th | <input type="checkbox"/> ANY Middle School |
| <input type="checkbox"/> 6th | <input type="checkbox"/> SAME child as last year |

START & END DATES

- | | |
|--|--|
| <input type="checkbox"/> Can begin volunteering in October, 2017 | <input type="checkbox"/> Can volunteer through April 20, 2018 |
| <input type="checkbox"/> If not October, please list alternate start date: _____ | <input type="checkbox"/> If not April 20, please list last available date: _____ |

ATHLETES

I participate in athletics. My sport is _____

SHARE Who do you know that would make a good PAL?

Name: _____
 Name: _____

Phone#: _____
 Phone#: _____

Please submit to: Beaver Dam High School office
 Questions? Contact PAL Coordinator, Barb Loeffler-Hartl
 920-885-7300 x 1135 loefflerb@bdusd.org