S.T.E.A.M Ahead: The Summer Volunteer Team at LASC



Return this application to:

362 N. Martin Luther King Blvd Lexington, KY 40508 Phone (859)252-5222 Fax (859)255-7448.

Questions? E-mail lascstaff@lasclex.org Website <u>www.lasclex.org</u>

As Art-gineers, summer volunteers receive the unique opportunity of working with teachers, students, and staff during 5 day class sessions and on art projects. We recommend volunteering for the entire class, but can accommodate a few volunteers for shorter time periods.

Prerequisites:

□ Submission of completed application and availability schedule

□ Minimum age of 16 (unless prior volunteer experience can be established)

□ Background check (we are required to run a background check on those over 16 years of age due to the fact that they will be working with children)

□ A check for \$30 made payable to the Living Arts & Science Center to pay for the background check. (If financial assistance is need please feel free to contact us)

□ Completed orientation

Volunteer shifts are:

8:45am-12:05pm 12:00pm-1:00pm 12:45pm-4:05pm

Art-gineer responsibilities may include: Classroom assistant/Education assistant/Project assistant

Characteristics required:

Positive energy, patience, tact, and flexibility are useful attributes for making your time at the Living Arts and Science Center enjoyable and fulfilling. Strong muscles are not required but are welcome and useful when accompanied by the above attributes!

We appreciate your help and hope you will gain valuable experience as you share your time and talents. -LASC Staff

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Age	Birth Date	_ Last grade level completed_		
Home Address		_City	_State	_Zip
College Addres	SS	_City	_State	_Zip

School	Last Name	First Name	Date
E-Mail Employer	Home Phone	College Phone	Cell Phone
Employer	E-Mail	0	
School	Employer		Direct Supervisor
Major/Minor	School		
Dielectal SMIS	Major/Minor		
Interests. Hobbies	Special Skills		
Three references that will vouch for you (think manners, work ethic, responsibility, work skills): Name Connection Best way to contact Name Connection Best way to contact Name Connection Best way to contact What age group do you enjoy working with and or feel most comfortable with? Circle all that apply Preschool K-2 3-5 6-8 9-12 Adults Would you consider yourself better at skilled independent projects that require attention to detail or interactive projects that require supervising/coaching/encouraging/assisting students in class? Why?	Interests		
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projects that require supervising/coaching/encouraging/assisting students in class? Why?	Would you consider y	ourself a behind the scene person o	r more of a leader? Why?
If yes how many hours do you need? Do you need documentation? Yes No Background Check Permission We are required to run a background check on those over 16 years of age, since you will be working with children. By signing bellow you give permission for the LASC to run a background check. A check for \$30 made payable to the Living Arts & Science Center will be needed to pay for the background check. (If financial assistance is need please feel free to contact us) Click here to read your rights regarding background checks SS# Signature Phone Photo Release I give permission for the Living Arts & Science Center or those designated by the LASC to collect and use the likeness, photograph, voice, written word, artwork or direct quotes of the above named volunteer. Such documentation may be used on the LASC website, in promotional materials, the newspaper or other such materials. I release the Living Arts & Science Center from any liability or responsibility for this use. Signature Date Emergency Contact Name Date Home Phone Date Parent Permission (required for volunteers under age of 18) Parent Signature: Parent Name (printed):	projects that require s Have you volunteered Have you volunteered	upervising/coaching/encouraging/as with us before? Yes No anywhere else? Yes No	ssisting students in class? Why?
We are required to run a background check on those over 16 years of age, since you will be working with children. By signing bellow you give permission for the LASC to run a background check. A check for \$30 made payable to the Living Arts & Science Center will be needed to pay for the background check. (If financial assistance is need please feel free to contact us) Click here to read your rights regarding background checks SS#			
Photo Release I give permission for the Living Arts & Science Center or those designated by the LASC to collect and use the likeness, photograph, voice, written word, artwork or direct quotes of the above named volunteer. Such documentation may be used on the LASC website, in promotional materials, the newspaper or other such materials. I release the Living Arts & Science Center from any liability or responsibility for this use. Signature Date Emergency Contact	We are required to run children. By signing be made payable to the L assistance is need ple	n a background check on those over ellow you give permission for the LA Living Arts & Science Center will be ease feel free to contact us)	SC to run a background check. A check for \$30 needed to pay for the background check. (If financial
I give permission for the Living Arts & Science Center or those designated by the LASC to collect and use the likeness, photograph, voice, written word, artwork or direct quotes of the above named volunteer. Such documentation may be used on the LASC website, in promotional materials, the newspaper or other such materials. I release the Living Arts & Science Center from any liability or responsibility for this use. Signature Date Emergency Contact Name Relation: Cell Phone Home Phone Work Phone Cell Phone Parent Permission (required for volunteers under age of 18) Parent Signature: Parent Name (printed):	SS#	Signature	Phone
Emergency Contact NameRelation: Home PhoneWork PhoneCell Phone Parent Permission (required for volunteers under age of 18) Parent Signature:Parent Name (printed):	Photo Release I give permission for the likeness, photograph, documentation may be	he Living Arts & Science Center or t voice, written word, artwork or direc e used on the LASC website, in pror	hose designated by the LASC to collect and use the of quotes of the above named volunteer. Such motional materials, the newspaper or other such
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Parent Signature: Parent Name (printed):	Parent Permission (r	required for volunteers under age of	18)
Parent Phone: Parent F-mail	•		
	Parent Phone	Pare	nt F-mail

AM= 8:45am-12:05pm

Lunch= 12:00pm-1pm

Please circle the volunteer times for which you are available for the session you want to volunteer. Submission of this availability schedule does not guarantee your schedule. These dates are considered requests until the final schedule has been released the week prior – be sure to check your email! Thank you!

PM= 12:45pm- 4:05pm

Am = 0.45am - 12.05pm		PM= 12.45pm- 4.05pm		Lunch- 12.00pm-1pm	
Summer 2013	Monday	Tuesday	Wednesday	Thursday	Friday
June 9-13	АМ	AM	AM	AM	AM
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	РМ	PM	РМ
June 16-20	АМ	АМ	AM	АМ	АМ
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	PM	РМ	РМ
June 23-27	АМ	АМ	AM	АМ	АМ
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	РМ	PM	РМ
	АМ	АМ	АМ	AM	АМ
June 30-July 2	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	PM	PM	РМ
July 7-11	AM	AM	AM	AM	AM
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	PM	РМ	РМ
July 14-18	АМ	AM	AM	АМ	АМ
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	РМ	РМ	РМ
	АМ	AM	AM	АМ	АМ
July 21-25	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	PM	РМ	РМ
July 28-Aug 1	АМ	АМ	АМ	AM	АМ
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	РМ	РМ	РМ
Aug 4-8	АМ	АМ	AM	АМ	АМ
	Lunch	Lunch	Lunch	Lunch	Lunch
	РМ	РМ	PM	PM	РМ