

Columbine Elementary School
Volunteer Application

Full Name _____
Last First Middle

Address _____
Street

_____ City Zip

Mailing Address, if different _____

Home Phone Number _____ Work Phone Number _____

Date of Birth _____ Social Security Number _____

Emergency Contact Information _____

I am willing to have a background check _____ Yes _____ No

I understand the basic philosophy and guidelines of Columbine Elementary School. I understand that I am to follow all rules and regulations of Woodland Park School District Re-2. I also understand that I am to report any suspicious activity to the administration of Woodland Park School District Re-2.

Volunteer Signature _____ Date _____