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| FOR ADMINISTRATIVE USE Contacted with assignment: _____ By: _____ Date: _____ Notes: _____ Entered into database: _____ |
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Volunteer Reading Partner - Information Sheet

Community

Name: _____ **Training Date:** _____

Addresses:

Home: _____

City, State, Zip: _____

Main Cross Streets: _____

Work: _____

City, State, Zip: _____

Main Cross Streets: _____

Contact Information:

Home Phone: _____ **Cell Phone:** _____

Work Phone: _____ **May we contact you at work?** Yes No

Home E-mail Address: _____

Business E-Mail Address: _____

Any other language: _____

Any teaching experience: _____

Any reading training: _____



For Administrative Use

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Assignment Information:

Do you prefer to be placed at a school near your home address or your work address?

Home

Work

How many miles each way are you willing to travel from your preferred location?

_____ miles

If you prefer a certain school, please write the school name here:

_____ Elementary School

Emergency Contact:

Name: _____

Telephone: _____ Relationship: _____

Comments: