

## Lewis Center Volunteer Organization

The Lewis Center for Educational Research provides hands-on field trips and programs to students of the High Desert and beyond. These programs are presented by members of the Lewis Center Volunteer Organization.

No experience is necessary to become a member of the Volunteer Organization. Volunteers are trained in the area(s) of their interest. Enthusiasm and the love of helping children learn in a fun manner is required.

Some of the programs the Lewis Center offers are:

AERONAUTICS/AVIATION WORKSHOPS ARCHAEOLOGY FIELD TRIPS CALIFORNIA GOLD RUSH FIELD TRIPS OPTICAL ASTRONOMY PROGRAMS RADIO ASTRONOMY SOLAR FIELD TRIPS WEATHER FIELD TRIPS ....AND MORE

## How to Become a Volunteer

Anyone, 18 or older, is welcome to apply to become a member of the Lewis Center Volunteer Organization. The steps to receiving your Volunteer Badge are:

1. Fill out the Volunteer Application completely and return it to the Lewis Center Volunteer Coordinator.

2. The Volunteer Coordinator will contact you regarding having your fingerprints taken at the Apple Valley Sheriff's Department. She will supply you with the form necessary to present to the AVSO. LiveScan fingerprinting is done by appointment and there is a \$12.00 fee. This fee is reimbursable to you by the Lewis Center.

3. Return the completed LiveScan copy to the Lewis Center Volunteer Coordinator. You will be notified of the next Orientation date.

**Lewis Center Jr. Volunteers:** Anyone 14 to 18 years of age may complete Steps 1-3. You will be notified, and need to attend Orientation with a parent or legal guardian, and each will need to sign a Memorandum of Understanding.

#### For more information, feel free to call: Laura Unferdorfer, Volunteer Coordinator at (760) 946-5414, ext. 277

Thunderbird Campus 20702 Thunderbird Road Apple Valley, CA 92307 (760) 242-3514 Mojave River Campus 17500 Mana Road Apple Valley, CA 92307 (760) 946-5414

# **Lewis Center for Educational Research**

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## VOLUNTEER APPLICATION PART I

(Please Print)

Last Name		First Name	Initial
Residence Address		City	Zip
Mailing Address (if diffe	erent from abo	ve)	
( ) Home Phone		( )	
Home Phone		Business Phone	
Date of Birth	Sex	Marital Status	# of Children
PRESENT EMPLOYI	MENT (occuj	pation, employer, and busi	ness address)
PREVIOUS EMPLOY	YMENT (occ	upation, employer, and bus	siness address)

### <u>PART II</u> CONFIDENTIAL

		Social Security Number		
Drivers License #	State	Expiration		
1. Previous Experience: What experience: What experience: working with youth as a volunteer		have you had that may a	assist y	ou in
2. Previous Residences: Last 5 ye	ears			
3. Current Memberships: Religio	us, community, y	outh, business, or othe	r organ	ization
<ol> <li>Education or Special Training: Elementary High Schoo</li> <li>Health Limitations or Special (</li> </ol>	ol College	-	es	_ Other
Elementary High Schoo	ol College	-	es	_ Other
Elementary High Schoo 5. Health Limitations or Special ( 	ol College Considerations	bstance abuse?	es yes	_ Other
<ul> <li> Elementary High School</li> <li>5. Health Limitations or Special (</li> <li>6. History of Legal Involvement</li> <li>a. Have you ever had a problem</li> <li>b. Have you ever been convicted</li> </ul>	ol College Considerations 	bstance abuse?	yes yes	no no
<ul> <li>Elementary High School</li> <li>Health Limitations or Special 0</li> <li>History of Legal Involvement <ul> <li>a. Have you ever had a problem</li> <li>b. Have you ever been convicted</li> <li>c. Have you ever been arrested</li> </ul> </li> </ul>	ol College Considerations  n with alcohol or su ed of a criminal offe or convicted for the	bstance abuse? nse? use or sale of drugs?	yes yes yes	no no no
<ul> <li>Elementary High School</li> <li>Health Limitations or Special G</li> <li>History of Legal Involvement <ul> <li>a. Have you ever had a problem</li> <li>b. Have you ever been convicted</li> <li>c. Have you ever been arrested</li> <li>d. Have you ever been hospital</li> </ul> </li> </ul>	ol College Considerations n with alcohol or su ed of a criminal offe or convicted for the ized or treated for a	bstance abuse? nse? use or sale of drugs? lcohol or substance abuse?	yes yes yes yes	no no no no
<ul> <li>Elementary High School</li> <li>Health Limitations or Special G</li> <li>History of Legal Involvement <ul> <li>a. Have you ever had a problem</li> <li>b. Have you ever been convicted</li> <li>c. Have you ever been arrested</li> <li>d. Have you ever been arrested</li> <li>d. Have you ever been arrested</li> </ul> </li> </ul>	n with alcohol or su ed of a criminal offe or convicted for the ized or treated for a or convicted for ch	bstance abuse? nse? use or sale of drugs? lcohol or substance abuse?	yes yes yes yes yes	no no no no no
<ul> <li>Elementary High School</li> <li>5. Health Limitations or Special C</li> <li>6. History of Legal Involvement <ul> <li>a. Have you ever had a problem</li> <li>b. Have you ever been convicted</li> <li>c. Have you ever been arrested</li> <li>d. Have you ever been arrested</li> <li>d. Have you ever been arrested</li> <li>f. Has you drivers license been</li> <li>g. Other than the above matters you or your background that</li> </ul> </li> </ul>	n with alcohol or su ed of a criminal offe or convicted for the ized or treated for a or convicted for ch suspended or revok s, is there any fact o	bstance abuse? nse? use or sale of drugs? lcohol or substance abuse? ild neglect or abuse? ed? r circumstance involving stion your being entrusted	yes yes yes yes	no no no no
<ul> <li>Elementary High School</li> <li>Health Limitations or Special C</li> <li>History of Legal Involvement</li> <li>a. Have you ever had a problem</li> <li>b. Have you ever been convicted</li> <li>c. Have you ever been arrested</li> <li>d. Have you ever been arrested</li> <li>d. Have you ever been arrested</li> <li>f. Have you ever been arrested</li> <li>f. Has you drivers license been</li> <li>g. Other than the above matters</li> </ul>	n with alcohol or su ed of a criminal offe or convicted for the ized or treated for a or convicted for ch suspended or revok s, is there any fact o	bstance abuse? nse? use or sale of drugs? lcohol or substance abuse? ild neglect or abuse? ed? r circumstance involving stion your being entrusted	yes yes yes yes yes	no no no no no

7. References: Please list those who are familiar with your character as it relates to working with youth.

Name		
Address	City	Zip
Home Phone	Relationship	
Name		
Address	City	Zip
Home Phone	Relationship	

### PART III

Please answer the following questions regarding your desire to become a Lewis Center Volunteer:

1. How did you hear about the Lewis Center Volunteer Organization?\_\_\_\_\_

2. Are you comfortable in presenting programs to students in a fun way?\_\_\_\_\_

3. Is there a particular area(s) of the Lewis Center Volunteer Organization where you would like to be involved? If yes, what area(s)? (Programs)\_\_\_\_\_\_

4. What motivated you to apply for a Volunteer position at the Lewis Center?\_\_\_\_\_

5. What skills/qualities do you bring that you feel will make your association with the Lewis Center a productive one?\_\_\_\_\_

### PART IV

Applicant's Name:	(Please	Print)
	(	)

## Carefully read the following statement before signing.

I, the undersigned, understand that:

a. The information that I have provided may be verified by contacting persons or organizations named in this application and I hereby release and agree to hold harmless from liability any person or organization that provides information concerning me to the Lewis Center for Educational Research and/or the Apple Valley Unified School District.

b. In signing this application, I swear or affirm that the information I have given herein is true and correct.

Signature				Date	
		(D		s line. For office use only)	
Date Fingerp	rinted			-	
Date Issued I	Badge			-	
Badge Numb	er			-	
Approved?	YES	NO	Signed	Date	
NOTES:					