



CARE Elementary School

Volunteer Application

2025 NW 1st Avenue Miami, FL 33127
Tel: (305) 571-2273 ext. 2256

Questions

1. How did you hear about CARE Elementary?
2. Is volunteering fulfilling a community service requirement for you?
3. What days are you available?
4. Are you able to make at least a six-month commitment?
5. Special Skills you can share with our children (Please put a check):
 - Arts and Crafts
 - Team Sport
 - Tutoring
 - Gardening
 - Other
 - Music (singing, piano, etc...)
 - Dancing
 - Exercise
 - Drama (skits, puppet shows)
6. What are your hobbies or skills?
7. What questions or concerns, if any, do you have about becoming a volunteer?
8. Is it any information you would like to share about yourself?

Volunteer Application

Full Name: _____

Address: _____

(City, State, Zip Code)

Home Phone: _____

Other: _____

Mobile Phone: _____

E-mail: _____

Language(s) Spoken: _____

If a student- School attending: _____

Clubs, Service, Groups, etc.: _____

Employer: _____

Occupation: _____

Emergency Contact Information:

Name: _____

Relationship: _____

Home Phone: _____

Other: _____

Mobile Phone: _____