

Volunteer Sign-Up Sheet

Check the following areas that you would like to volunteer and circle the day you would be available to help. I will send home a volunteer schedule at the end of the third week, along with starting dates for the volunteers. Please be watching for this!

Volunteer Name and Phone Number: _____

Your child's name: _____

_____ 9:00-10:30 Reading Block (Monday, Tuesday, Wednesday, Thursday)

_____ 10:45-11:15 Writing Block (Monday, Tuesday, Wednesday, Thursday)

_____ Copying/Clerical Work (Monday, Tuesday, Wednesday, Thursday)

_____ Check out leveled books from the library and sort in book tubs

_____ Room Parent (plan and coordinate all parties)