

Summer Volunteer Application Addendum for Applicants under 18

Instructions: Complete Page 1 and 2 and return to CASA with Summer Volunteer Application

Volunteer Name _____ Email _____

Mailing Address _____
Street City Zip

(IF APPLICABLE) Student Status: Fr _____ So _____ Jr _____ Sr _____ Other _____

Name and Location of School _____
 _____ Academic

To be completed by two (2) classroom teachers and the school administrator

By signing below I confirm that the above named student is in good academic standing and has no history of misconduct. I confirm that this student, to the best of my knowledge, has demonstrated the responsibility and commitment required to be a volunteer at Summer CASA at Hope College.

Teacher Name	Subject Area	Signature / Date	Comments
1.			
2.			
Administrator Name	Title	Signature / Date	Comments

Parent Completion on Page 2

