

Personal Information

First Name: _____ Last Name: _____

Address: _____

Mailing Address (If Different): _____

Phone Numbers

Home : _____ Work: _____ Cell: _____

E-Mail Address: _____

Date of Birth: _____

Social Security Number (Required): _____

ID/Driver's License Number (Required): _____

How many hours can you work? _____

Areas of Interest

General : Tutoring: Mentoring (Approval Required):

Administration: Recreation: Internship (Approval Required):

Are you in college? Yes No

If yes, what major? _____

Name of College/University? _____

Anticipated Date of Graduation _____

Are you applying for Federal Work Study? Yes No

Medical and Background Information

Do you have any physical limitations?

Yes

No

If yes, what:

Are you on any medication?

Yes

No

If yes, describe:

Have you used any illegal substance(s) in the past 24 months?

Yes

No

If yes, list substance:

Have you ever been convicted of a felony?

Yes

No

If yes, describe the nature of the felony and disposition:

The below signed individual acknowledges that prior to being allowed to tutor and/or volunteer at the Reichert House Youth Academy, that a criminal background check will be performed by the Gainesville Police Department, they acknowledge that all information given above is true and accurate.

Print Full Name

Signature

Date

Criminal Check completed and signed by: _____

ID #: _____

Date: _____

Please attach a copy of your driver's license or ID in order to complete this form.

**REICHERT HOUSE YOUTH ACADEMY
AVAILABILITY SCHEDULE**

Tutoring hours are from 3:00pm – 5:30pm , Operation hours are from 10:30am – 7:00pm

Name: _____

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: Closed

Contact Information:

Home Phone: _____

Cell Phone: _____

Email : _____