



**Kilgore Independent School District**  
**2017-2018 Bulldog Volunteer Application**

**Name:** \_\_\_\_\_ **Driver's License #:** \_\_\_\_\_  
First M.I. Last

**Current Address (No P.O. boxes):** \_\_\_\_\_  
Street City State Zip

**Phone Number:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Emergency Contact (Name & Number):** \_\_\_\_\_  
Name Phone #

**Campus (check all that apply):** \_\_\_ KPS (Pk-1) \_\_\_ Chandler (2-3) \_\_\_ KIS (4-5) \_\_\_ KMS (6-8) \_\_\_ KHS (9-12)

**Days You Can Volunteer:** \_\_\_ Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday

**Times You Can Volunteer:** \_\_\_ Mornings \_\_\_ Afternoons \_\_\_ Evenings

**Areas of Interest:** \_\_\_ All \_\_\_ PTA \_\_\_ Watch D.O.G.S \_\_\_ Office/Clerical \_\_\_ Reading  
\_\_\_ Junior Achievement \_\_\_ Mentoring \_\_\_ Vision/Hearing Screening  
\_\_\_ Library \_\_\_ Booster Club (Football, Band, Basketball, etc.) \_\_\_ HOSTS

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by Kilgore Independent School District. I authorize the individual or organization named in this application to provide Kilgore Independent School District (its employees, agents, or representatives) with any relevant information that may be required to arrive at a volunteer placement decision and hereby release any such individuals or organizations from any and all liability, which they might otherwise incur as a result. I understand that any misrepresentation or omission of material fact on this application may be justification for refusal for placement. I have read the Volunteer Acknowledgement and this statement and accept the same as a condition of my placement with Kilgore Independent School District.

If you agree to the terms of the Volunteer Acknowledgement, please indicate by signing and dating below.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**