



**Volunteer Application**  
(Please print clearly)

Name:

Address:

Phone (Home and Work/Cell):

Email Address:

Employer/School:

Emergency Contact and Phone Number:

Do you have a valid Georgia Driver's License? Yes or No

If you do have a license in another state, please list the state \_\_\_\_\_

Have you ever been convicted of a crime? If yes, please explain:

Are you currently involved in any open criminal litigation? If yes, please explain:

**(If the answer to EITHER of the above questions changes, we must be notified IMMEDIATELY.)**

Please list three references:

Name	Phone Number	Years Acquainted

Which area of the program are you interested in? (You may choose more than one.)

Kitchen	Administrative Office	Classroom Tutoring	Fundraising/Development

What is your availability? Note: The Study Hall's after school program runs from 2:30 – 4:30 pm Monday through Friday, and 8:00 am – 5:00 pm during summer camp.

Monday	Tuesday	Wednesday	Thursday	Friday

List any other areas of special interest:

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By signing below, I attest to the truthfulness of all information listed on this application. I agree to participate in a criminal background check, driver license check, and reference check if I am selected to become a volunteer.

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Signature

Date

**Please mail to The Study Hall, 1010 Crew St, Atlanta, GA 30315 or email to [jvance@thestudyhall.org](mailto:jvance@thestudyhall.org). For more information, call us at 404.659.1415.**

**Next Steps:** Thank you! Our volunteer coordinator will contact you in the near future to schedule an interview.