



RETURN FORM TO:  
 Jana Emerson  
 Associate Executive Director  
 Street School  
 1135 S Yale Avenue  
 Tulsa, OK 74112  
 Phone: 918-833-9800  
 Fax: 918-833-9858  
 emersja@tulsaschools.org

**VOLUNTEER APPLICATION**

Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
 \_\_\_\_\_ City ST Zip

Birthday: \_\_\_\_\_ Email: \_\_\_\_\_

Facebook Name: \_\_\_\_\_ Twitter Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Education Completed:  High School  College  Post Graduate  Other

Area of Study: \_\_\_\_\_ School Name: \_\_\_\_\_

Organization Currently Working for: \_\_\_\_\_

Job Title: \_\_\_\_\_ Length of Time in Position: \_\_\_\_\_

Organization Retired From: \_\_\_\_\_

Position Held: \_\_\_\_\_ Length of Time in Position: \_\_\_\_\_

My hobbies or areas of interest are:  
 \_\_\_\_\_

What motivated you to become a mentor?  
 \_\_\_\_\_

Area(s) of Interest:  Mentoring  Volunteering  Clerical  Fundraising  
 (check all that apply)  Student Store  Test Monitor  Other

Please list two people, other than relatives, who we might contact as a personal reference:

1. \_\_\_\_\_  
 First Name Last Name Number
2. \_\_\_\_\_  
 First Name Last Name Number

*A background check will be conducted. Each volunteer will be invited to a training and orientation.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_