



# JOB ASSIGNMENT REQUEST FORM

## NORTH

Parent's Name

Email

Phone Number

Check one:  First Semester  Second Semester

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
1 <sup>st</sup> Period			
2 <sup>nd</sup> Period			
3 <sup>rd</sup> Period			
4 <sup>th</sup> Period			

Above requests will be considered when assigning members to the classroom positions, however, we cannot guarantee placement in your requested positions.

You will be assigned either a Set-Up or Tear-Down responsibility. Please list any restrictions you may have (physical limitations, not attending 1<sup>st</sup> or 4<sup>th</sup> period, etc).

PLEASE INDICATE ANY AGE(S) THAT YOU ARE NOT COMFORTABLE WORKING WITH AS A VOLUNTEER:

SPECIAL NOTES: