



# 2018-2019 Volunteer Profile

Event ID: \_\_\_\_\_  
(Office Use)

(Mr./Mrs./Ms./Other) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Phone: Cell \_\_\_\_\_ Home \_\_\_\_\_ E-mail \_\_\_\_\_

Do you speak Spanish? Yes \_\_\_\_\_ No \_\_\_\_\_ A little \_\_\_\_\_

Were you a JA student? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you volunteered at JA in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

I grant Junior Achievement (JA) the **right to photograph me**. I grant JA permission to reproduce, use, re-use, publish, display, copyright, and distribute all media taken in which I might appear individually or in conjunction with other photographs, images, text, and/or captions in connection with any promotion, advertising, and publicity of JA in all media.

I agree to return the JA Kit if I am unable to complete JA. I understand I could be invoiced if the materials are not returned.

I have received a copy of Junior Achievement's Volunteer Standards and have read, understand and will abide by them. I understand that by signing this contract I am agreeing to commit my time to volunteer and will provide a substitute in case I am unable to fulfill my commitment. Please return this form to the Junior Achievement office at: **3404 N Ben Wilson, Victoria, TX 77901** or Fax to **(361) 572-8237** or Scan/Email to [lmantey@vbectx.org](mailto:lmantey@vbectx.org)

Printed Name\*: \_\_\_\_\_ DOB\*: \_\_\_\_\_

Signature\*: \_\_\_\_\_ Date\*: \_\_\_\_\_

<b>For JA office use only:</b>		
JA Staff Initials	Assigned Date	Event ID #
School Assigned	Grade	EDU ONLY 2301-Title One School
Volunteer Conduct Policy: yes no	Background check submitted: yes	Received materials: yes _ date
Reassignment:	Date	School
Grade		
<b>Notes or Follow-Up:</b>		