

Castro Valley Library Homework Center Helper Application

Last Name _____ First Name _____

Address _____ City _____ Zip _____

Telephone (home) _____ (cell) _____

Best times to reach you _____

Email (optional) _____

School _____ Grade _____

Are there any languages other than English that you speak? _____

Why would you like to become a homework helper?

Do you have any experience working with children?

Best school subjects _____

The Homework Center is open Monday through Thursday from 3:30-5:00 pm
(on days that children are in attendance in the Castro Valley schools).

What days are you available?

Monday 3:30-5:00 _____

Tuesday 3:30-5:00 _____

Wednesday 3:30-5:00 _____

Thursday 3:30-5:00 _____

We are asking you to work **a minimum of one day a week, for a total of 10 hours. By signing here, you are making that commitment and have your parents' permission to do so.**

Student signature

Date

Parent signature

Date