



ST. VRAIN VALLEY SCHOOLS
academic excellence by design

**Tax Work-Off Program
Application Form
(Please print)**

PERSONAL INFORMATION

Date: _____

Name: _____

Address: _____

Street City State Zip

Home Phone Number: _____ Date of Birth: _____

E-mail Address: _____ Social Security # _____

EMERGENCY CONTACT

Name: _____ Phone: _____

VOLUNTEER INFORMATION

What type of work would you like to do for the tax work-off program? Mark all that apply.

Clerical Tutoring Classroom Assistance Outdoor Grounds Work

Light Custodial Library Other _____

(Please specify)

Do you prefer volunteering at a particular school or location?

No Yes _____

(Please indicate)

What hours and days do you prefer to work? _____

Are you proficient on a computer? No Yes

Skills you have that may be helpful in placing you? _____

Physical or health conditions we should be aware of (climbing stairs, lifting, etc.) _____

ELIGIBILITY REQUIREMENTS

Please check box next to each criteria to verify your eligibility.

- Applicants must be 60 years of age or older, or a person with a disability, certified by your doctor and certification attached.
- Applicants must own AND live in the home for which they are applying (must be residential non-income producing).
- Applicants must reside in the St. Vrain Valley School District boundary area.
- Only one person per household may apply.

Signature: _____

Applications will be accepted between November 3 and November 14, 2014; work to be completed January-April 2015.

Please return this application to: St. Vrain Valley Schools
Attn: Linda Lohmann
395 South Pratt Parkway
Longmont, CO 80501
Phone: 303-682-7205