

2019-2020

All Saints Catholic School Room Parent Volunteer Sign-up Form

Volunteering as a Room Parent is rewarding and is a great way to help in your child's individual classroom. Please make this a special year by volunteering to help out in your child's classroom in some capacity throughout the school year. Every little bit helps the teachers and students tremendously. You can be involved as either a Head Room Parent or a Room Parent volunteer.

All parent volunteers MUST be Virtus Certified and attend the mandatory Room Parent meeting on Tuesday, September 24, 2019 at 6:00pm. Please complete and return this form to your child's teacher by Friday, September , 20 2019. You will be notified before the mandatory meeting if you were selected as a room parent.

If you have any questions, please contact Kenise Ford at Kenise.f@gmail.com.

The Head Room Parent will receive the list of Room Parent Volunteers and the Head Room Parent Guidelines from the PTO Room Parent Chair.

() HEAD ROOM PARENT

Duties:

- Be the liaison between the teacher and the other parents for special classroom activities
- Meet with the teacher to establish volunteer needs for the year
- Assign parent volunteers equally for parties, field trips and other events
- Determine with the teacher and organize with the class a classroom basket or classroom project that will be auctioned off at the Spring Carnival
- Attend PTO meetings if possible to keep informed of upcoming PTO events and activities

The Room Parents provide support for the Teacher and Head Room Parent by providing help at special classroom functions in the various ways listed below.

() ROOM PARENT

- () Help at parties
- () Provide baked goods
- () Provide other food/drink/paper goods
- () Chaperone Field Trips
- () Assist in classroom – The teacher may like some assistance with classroom tasks. The teacher will arrange directly with the parent.

Room Parent Sign-Up

Please print clearly

CHILD'S NAME: _____ GRADE: _____

I am interested in serving as Head Room Parent _____ Room Parent _____

YOUR NAME: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

If you served as Head Room Parent previously, please indicate the school year (s): _____ VIRTUS Certified () yes () no