



## 2018-2019 FVMS Parent Involvement Opportunities

**Welcome!** You are a vital member of the Fox Valley Montessori School community. Thank you for making the commitment to become an active participant in your child(ren)’s school experience. We look forward to working with you during the upcoming school year. In keeping with the purpose and the spirit of the Montessori approach to education, per the parent handbook, FVMS requires each parent to become involved in the activities of the school. This positive participation includes communication between home and school, as well as the **parents agreement to provide 20 hours of service or \$300.00 to the school each year**. Parents are reminded that through their volunteer participation, the child sees and understands that the parent sincerely and deeply cares about the student and the school and a sense of value and pride is fostered. **Please check any areas that may appeal to you.**

Classroom/Office Support during classroom time	Fundraising Support	Social Events	Board Committees	Done-in-a-Day Jobs or Specific Tasks
<input type="checkbox"/> Picture Day Volunteer (date TBD) <input type="checkbox"/> Vision/Hearing Screening Volunteer (October TBD) <input type="checkbox"/> Reading parent (elementary) <input type="checkbox"/> Classroom Enrichment – special presentations <input type="checkbox"/> Shop for weekly snack supply <input type="checkbox"/> Volunteer to answer phones/door during weekly staff meeting (Tuesdays 3:20pm to 4:00pm) <input type="checkbox"/> Other _____	<input type="checkbox"/> Annual Benefit Committee Member <input type="checkbox"/> Scholastic Book Fair Coordinator (Nov/May) <input type="checkbox"/> Scholastic Book Fair Volunteer – setup, take down, or cashier (Nov/May) <input type="checkbox"/> Scholastic Monthly Book Order Coordinator (1 per classroom) <input type="checkbox"/> Montessori Services Orders Oct <input type="checkbox"/> Campbell’s Soup Label Coordinator (year round) <input type="checkbox"/> Box Tops for Education Coordinator (year round) <input type="checkbox"/> Holiday Gift Shop (Dec) <input type="checkbox"/> Children’s Resale (Sept/April)	<input type="checkbox"/> International Children’s Day Coordinator or Volunteer (Oct) (please circle one) <input type="checkbox"/> Thanksgiving Feast (Nov) <input type="checkbox"/> Holiday Open House (Dec) <input type="checkbox"/> Children’s Sock Hop Coordinator or Volunteer (Feb) (please circle one) <input type="checkbox"/> Science/Art Fair (May) (alternating years) <input type="checkbox"/> Parent Education Events <input type="checkbox"/> Teacher Appreciation Week	<input type="checkbox"/> Buildings & Grounds <input type="checkbox"/> Fundraising <input type="checkbox"/> Parent Committee <input type="checkbox"/> Grants Funding Committee <input type="checkbox"/> Finance Committee	<input type="checkbox"/> Organizing a closet, storage area, room, etc. <input type="checkbox"/> Painting <input type="checkbox"/> Building (inside) Maintenance <input type="checkbox"/> Grounds (outside) Maintenance <input type="checkbox"/> Classroom Support – copying, laminating, etc. <input type="checkbox"/> Photographer at events for yearbook <input type="checkbox"/> Other _____ (Hobbies?)

Parent volunteer’s name(s): \_\_\_\_\_ Contact number(s): \_\_\_\_\_

Email address: \_\_\_\_\_

Your child(ren)’s name(s): \_\_\_\_\_

By signing below, I/we acknowledge that I/we will not be paid for my/our services as a volunteer. In addition, I/we understand that during the time that I/we volunteer at FVMS, I/we must comply with all confidentiality laws pertaining to information seen or heard within the school.

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

I/We elect to make a tax-deductible donation in addition to the hours I/we provide.

I/We elect to make a tax-deductible donation in lieu of volunteering my/our time.