

# Odyssey Academy Needs You!

Odyssey Academy Volunteer Form 2010-2011

Volunteer's Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Student	Grade	Teacher

I, \_\_\_\_\_, consent to Odyssey Academy performing an investigative background check in compliance with the Fair Credit Reporting Act.

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Race \_\_\_\_\_

SSN \_\_\_\_\_ Driver's License State and Number \_\_\_\_\_

Maiden/other name(s) used in any/all other records \_\_\_\_\_

Please list any counties you have previously lived in.

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Odyssey offers many opportunities to volunteer as much or as little as you would like.  
Thank you so much for your interest in volunteering at Odyssey Academy!