



**DISTRICT SCHOOL BOARD OF PASCO COUNTY  
PEER VOLUNTEER APPLICATION**

MIS Form #661  
Rev. 1/11

Date \_\_\_\_\_

School Where Volunteering \_\_\_\_\_

Student \_\_\_\_\_

Student Number \_\_\_\_\_

Address \_\_\_\_\_

Number

Street

City

State

Zip

Telephone Number \_\_\_\_\_

DOB \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

School Attending \_\_\_\_\_

Grade \_\_\_\_\_

Student Signature \_\_\_\_\_

Parent Signature \_\_\_\_\_

VOLUNTEER  
COORDINATOR  
INITIALS

DISTRIBUTION: Copy to School    SCHOOL: Copy to Volunteer Programs, District Office, via Courier