



Inspiring Minds Reference Form for Prospective Volunteers aged 16 - 17 Years Old

This form must be completed by all prospective volunteers aged 16-17 years old. has three parts, one for the student, one for the parent/guardian, and one for a school representative. If you have any questions about this form, please contact us at 401-274-3240 or inspire@Inspiringmindsri.org.

For Student to complete:

Students who are 16 years or older and have not yet graduated high school must complete this form to apply to volunteer with Inspiring Minds.

Student Name: _____

Student ID#: _____

Student Email: _____

Student Phone: _____

Secondary School Status (Choose ONE)

- ☐ I am currently a high school student (Secondary School Approval must be completed by high school representative)
- ☐ I am currently a home school student (Secondary School Approval must be completed by home school representative)
- ☐ I am no longer attending high school and did not graduate. I have severed all relationships with my district high school.

Student Signature: _____ Date: _____

Parent/Guardian Acknowledgement: For parent/guardian to complete.

Parent Name: _____

Relationship to Student: _____

Parent Email: _____

Parent Phone: _____

My child, _____ has my consent to apply to volunteer at Inspiring Minds. A high school volunteer is expected to:

- Consistently show up on time to volunteer for the assigned shift, or contact the volunteer office by phone at 401-274-3240 with the reason for not being able to attend.
- Remain on the school premises throughout their assigned shift.
- Wear the correct attire at all times.
- Be respectful of parents and their families, staff, and other volunteers.
- Always follow Inspiring Minds rules and procedures, particularly those that pertain to student confidentiality and internet access.

_____ I give permission for my child's photo or statements about Inspiring Minds program to be used in Inspiring Minds publications, press releases, etc.

_____ I authorize Inspiring Minds to make necessary arrangements for my child in case of serious injury or illness. I understand that there are risks in my child's presence and participation in this program. I hereby agree on behalf of my

child to assume any and all risk of bodily injury, or property damage arising out of or caused by my child's presence or participation in this program.

_____ I give permission for my child to go on field trips and short walks, to and from, local community resources, including but not limited to, the libraries and area parks as part of the program plan.

As lawful consideration for Inspiring Minds permitted my child to volunteer in Inspiring Minds KidsBridge Summer Learning Program (the "Program"), I agree to all the terms and conditions set forth below:

I recognize there are certain inherent risks associated with my child's participation in the Program and assume full responsibility for personal injury to my child. I hereby expressly waive and release any and all claims, now known or hereafter known, against Inspiring Minds, and its officers, directors, employees, agents, successors, and assigns (collectively, "Releasees"), arising out of or attributable to my child's participation in the Program, whether arising out of the negligence of Inspiring Minds or any Releasees or otherwise. I covenant not to make or bring any such claim against Inspiring Minds or any other Releasee, and forever release and discharge Inspiring Minds and all other Releasees from liability under such claims.

This statement constitutes the sole and entire agreement of Inspiring Minds and me with respect to the subject matter contained herein and supersedes all prior and contemporaneous understandings, agreements, representations, and warranties, both written and oral, with respect to such subject matter.

Parent/Guardian Signature: _____ Date: _____

Student Name: _____

Secondary School Approval Required for current high school and home school students

For secondary school representative to complete:

High School: _____

Anticipated Graduation Date: _____

Representative Name: _____

Title: _____ Representative Email: _____

Phone: _____

The above-named student is in good standing and has my recommended to volunteer in Inspiring Minds summer learning program for youth.

High School/Home School Representative Signature: _____

Date: _____

Please check one:

This student _____ Does _____ Does Not have a requirement to complete community service and or service learning. This student _____ will _____ will not need documentation of their service sent to the school.

If required: please provide instructions on how best to report this information to the school.
