



Senior Tax Exchange Program (S.T.E.P.) Volunteer Application

Name of Applicant: _____ Date: _____

Phone: _____ Alt. Phone: _____

E-mail: _____

Present Street Address _____

City _____ State: _____ Zip: _____

Do you fulfill S.T.E.P. Requirement: age 62 or over, eligible for social security, and own a home and reside within the boundaries of the School District of Greenfield? Yes _____ No _____

Please list your career/work experience: _____

Do you speak a second language? Yes _____ (What Language? _____) No _____

I am available (circle months that apply)

Months: September October November December January February March April May

Check appropriate box(s)

Times/Days	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					

School(s) where I would be willing to work (check all that apply)

_____ Edgewood Elementary

_____ Greenfield Middle School

_____ Elm Dale Elementary

_____ Greenfield High School

_____ Glenwood Elementary

_____ Maple Grove Elementary

Preferred Grade Level to work with: K-2 3-5 6-8 9-12

Areas in which you could be of assistance:

Assist students with:

_____ Reading

_____ Math

_____ Computers

_____ Art

Assist with/in:

_____ Library

_____ Clerical work

_____ Preparing bulletin boards

_____ Foreign language interpretation