



**EVERYBODY WINS! IOWA
PARENT CONSENT AND RELEASE FORM
FOR HIGH SCHOOL VOLUNTEERS (under age 18)**

- I give permission for my daughter/son, _____, to volunteer as a High School Mentor with the EVERYBODY WINS! IOWA reading/mentoring program.
- I understand that the minimum time she/he will be volunteering is one school semester, preferably the entire school year, and that she/he will spend 30-60 minutes each week with an elementary school student according to the school calendar.
- I understand that it is the responsibility of my High School student to consistently meet weekly with her/his mentee student and we will encourage them to do so.
- I understand that her/his involvement in the EVERYBODY WINS! IOWA reading/mentoring program will be under the guidance of the EVERYBODY WINS! IOWA Program Staff and she/he is required to have regular communication with the school coordinator/program manager and to return messages, calls, emails, etc. in a timely manner.
- I understand that transportation to the Power Read program site is the responsibility of the High School student and/or parent(s).
- I understand that my High School student will not transport her/his mentee student or leave the mentee student's school grounds with her/his mentee student.
- I give my consent for a background check to be conducted for my daughter/son as required of all the EVERYBODY WINS! IOWA reading/mentoring program volunteers.
- I feel this is a good opportunity for my daughter/son and fully support and recommend her/his involvement with the program. Please accept this consent form as a positive reference for my daughter/son to participate in this program.

Parent/Guardian Name

Date

Parent /Guardian Signature

Date