

STUDENT VOLUNTEER REQUEST FORM

Email Address:	mic@dosp.org; ks@dosp.org; fingerprinting@dosp.org		
Fax Number:	727-374-0215	I-0215	
	Diocese of St. Pe	tersburg	
Mailing Address:	Safe Environment Program Office		
	6363 9 th Ave., North – St. Petersburg, FL 33710		
		ORGANIZATION REQUESTING STUDENT VOLUNTEER	
Diocesan organiza	ation requesting		
one or more Student Volunteers			
Contact Person's	Name		
Contact Person's Phone Number			
Contact Person's Email Address			
Number of Student's Needed			
Provide starting and ending dates			
Student's Supervi	sor's Name		
	Descr	ribe the Tasks that the student will perform (attach a sheet if necessary for task description	
		For SEP Office Use Only	