

## Society of Toxicology K-12 Outreach Volunteer Form

Please provide the information below to indicate your interest in participating in SOT K-12 outreach activities.

Name				Position/Title		
Affiliation						
Address 1						
Address 2						
City		State		Zip		
Phone	( )	E-Mail				Today's Date

Please provide some information about your background below (education, areas of expertise, etc.; 4-5 sentences).

### I am interested in:

(Use a "√" to indicate that you want to volunteer; use a "C" to indicate that you are currently involved in that activity)

Mark √	<b>SOT National Education Activities</b>
	Assist with <i>Paracelsus</i> teacher workshop _____ recruit teachers _____ assist on site
	Mentor teachers at the SOT Annual Meeting (indicate grade preference, if any) _____ Grades K-3 _____ Grades 4-8 _____ Grades 9-12
	Provide insight on K-12 outreach to other toxicologists
	help with exhibits
	Serve on an education committee
	Assist in curriculum review or development
	Describe other:
Mark √	<b>SOT Regional Chapter Activities</b>
	Organize or assist with regional teacher workshops
	Organize or assist with other regional teacher activities
	Serve as education contact for SOT in my area
	Describe other:
Mark √	<b>Assisting on Location as Needed</b>
	Assist in classroom or other location (as speaker, assist with lab activities, student projects, etc.)
	Topics:
	Help with career days
	Volunteer for science fairs
	Describe other:
	Maximum distance willing to travel to school site? _____ miles
	Maximum time available on any given day (not including travel)? _____ half day _____ full day
Mark √	<b>Providing Workplace Tours and Other Activities</b>
	Company or lab tours
	Student or teacher job shadowing programs (visits to your place of work for one day or periodically )
Mark √	<b>Significant Research or Job Experience</b>
	paid student or teacher jobs or research internships offered by lab or other workplace
Mark √	<b>Individualized "One-on-One"</b>
	(e.g., partner with an individual school/program, student tutoring, science fair advisor, or other student or teacher mentoring)
Mark √	<b>Other</b>
	Describe:

Return the completed form to SOT Headquarters, [bettye@toxicology.org](mailto:bettye@toxicology.org) or by FAX: (703) 438-3113.