

Student Aide Request Form

Student Name _____ Grade _____

Aide position sought (check one) Classroom Aide _____
Office Aide _____
Title I Aide _____

Proposed curriculum (completed by staff member)

Have you been an aide before? _____

Teacher approval _____ Date _____

Counselor approval _____ Date _____

Parent/Guardian approval _____ Date _____

Principal approval _____ Date _____