



JA BizTown™ Volunteer Information

Volunteers Needed

Dear Guardians and Friends of *JA BizTown* students:

On _____ (date), our class will be going to *JA BizTown*, a unique experiential education program operated by JA of Central Indiana. This on-site visit is one of the concluding activities to the curriculum, which encompasses important elements of community and economy, work readiness, financial literacy, and business management.

While visiting *JA BizTown*, each student will become a Town Citizen and assume a job in one of 15 businesses. Students will experience economics first-hand by producing and/or selling products, receiving a paycheck, working as a member of a business team, repaying a business loan, shopping, and managing a personal checking account.

To ensure a successful visit, we need 15 to 30 adult volunteers to accompany us to *JA BizTown*. The role of the volunteer will be to provide guidance to the students as they operate their businesses – specifically, they help facilitate the simulation activities and mentor the students..

Volunteers who assist during the on-site visit must participate in a **40-minute on-line* training** to prepare for their work mentoring the students. Volunteers must also agree to **arrive at *JA BizTown* 45 minutes before students** on the visit day. This will allow time for instructions related to the on-site schedule and procedures.

Please complete the form below and return it to school no later than _____ (date). Soon after this date you will receive an e-mail message that will provide a link to the on-line training, your volunteer code, and additional information about our visit.

** Arrangements for on-line training to be completed at the JA facility may be made if you do not have access to a computer at home, work, school, or library.*

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Yes, I want to volunteer for *JA BizTown™* and will complete the 40-minute on-line training. I will also make arrangements to arrive at *JA BizTown* 45 minutes before students, on our visit day.

I am unable to volunteer at this time.

Name: _____

School: _____

Child's Name: _____

Phone: _____

Address: _____

City: _____ Zip: _____

E-mail: _____