

## Volunteer Application

Social: \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last

Phone Number: \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Do you have a preference for the type of volunteer service you will be providing? \_\_\_\_\_ - If yes, specify: \_\_\_\_\_

Client Contact: \_\_\_\_\_ Non-Client Contact: \_\_\_\_\_ Special Project/Event: \_\_\_\_\_  
Individual Assignment: \_\_\_\_\_ Student Intern: \_\_\_\_\_ Fundraising: \_\_\_\_\_

With training, would you accept other assignments as a volunteer? \_\_\_\_\_

Please indicate the time you are willing to serve:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM:	AM:	AM:	AM:	AM:	AM:	AM:
PM:	PM:	PM:	PM:	PM:	PM:	PM:

When are you able to start? \_\_\_\_\_

List any previous volunteer experience and/or volunteer training: \_\_\_\_\_

Are you volunteering for class credit? \_\_\_\_\_ If yes, what school? \_\_\_\_\_ Number of hours needed: \_\_\_\_\_

Instructor's name: \_\_\_\_\_ Instructor's email: \_\_\_\_\_ Instructor's phone number: \_\_\_\_\_

Are you court appointed? \_\_\_\_\_ If yes, please list probation officers name, address, and phone number: \_\_\_\_\_

Have you worked with mentally ill adults? \_\_\_\_\_ Have you worked with intellectually disabled adults or children? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If so, where? \_\_\_\_\_

What is your job title? \_\_\_\_\_ Employers address and phone number: \_\_\_\_\_

Previous employer, address, phone, length of service, job title, and supervisor.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Highest level of education completed?

Elementary: \_\_\_\_\_ High School: \_\_\_\_\_ Vocational/Technical Training: \_\_\_\_\_  
College: \_\_\_\_\_ Graduate School: \_\_\_\_\_ Other: \_\_\_\_\_

Was degree received? \_\_\_\_\_ If so, what field of study? \_\_\_\_\_

List your skills, hobbies, interest, community activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have access to transportation? \_\_\_\_\_

Have you ever been convicted by Federal, State, or any other law enforcement authorities for any violation of any Federal, State, or County Municipal law, regulation, or ordinance other than a minor traffic violation? \_\_\_\_\_

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Please note, any criminal history that is a contradiction to working as a volunteer may result in denying approval of the applicant.

List three references with first and last name, full address, and telephone number. (Please do not list relatives)

Name	Address	Phone

In case of an emergency, please notify: \_\_\_\_\_

### VOLUNTEER AGREEMENT

- I CONSENT TO A CRIMINAL BACKGROUND/HISTORY CHECK.
- I AFFIRM THAT THE INFORMATION THAT I HAVE PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
- I AGREE TO CONFORM WITH TEXOMA COMMUNITY CENTER RULES AND REGULATIONS TO THE BEST OF MY ABILITY. I
- AGREE TO RESPECT THE CONFIDENTIAL NATURE OF CASE INFORMATION AS WELL AS MY PERSONAL CONTACTS WITH
- CLIENTS.
- I AGREE TO INFORM THE CENTER IF I AM NAMED IN COMPLAINTS OR INDICTMENTS OR CONVICTED OF OFFENSES.
- I UNDERSTAND THAT I WILL BE IN SERVICE ON A RECIPROCAL TRIAL BASIS AND AGREE TO PARTICIPATE IN ORIENTATION AND TRAINING.
- UNDERSTAND THAT I WILL **NOT** RECEIVE ANY MONETARY COMPENSATION FOR MY VOLUNTEER SERVICES.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

*Volunteers Make the Difference!*