



CHILDREN'S ADVOCACY CENTER
OF SMITH COUNTY
HEALING • SAFETY • HOPE • JUSTICE

Volunteer Application

Applicant Information		
Last Name	First Name	M.I.
Street Address		Apartment/Unit #
City	State	Zip
Email Address		Phone #
Preferred method of contact – Email <input type="checkbox"/> Phone <input type="checkbox"/>		Are you 18 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/>
How many hours would you like to volunteer each week? _____ Please fill out your availability below –		
Monday <input type="checkbox"/>	Tuesday <input type="checkbox"/>	Wednesday <input type="checkbox"/>
Thursday <input type="checkbox"/>	Friday <input type="checkbox"/>	
Time frame _____	Time frame _____	Time frame _____
Time frame _____	Time frame _____	Time frame _____
Opportunities: <input type="checkbox"/> Family Greeter/Front Desk Reception Spend time with our clients in the lobby. Also, answer phones and help with other duties as assigned. <input type="checkbox"/> Happy Bear Help with community education by being our Happy Bear. <input type="checkbox"/> Special Events/Projects Volunteer your time volunteering at our fundraisers and community events. <input type="checkbox"/> Handyman/Facilities Care Help with tasks around the facility <input type="checkbox"/> Seasonal Assistance Drives Help with Back-to-school, Thanksgiving, Christmas, etc., drives to help families in need. Consider hosting a drive at your church, community group or neighborhood to collect needed items for these programs. <input type="checkbox"/> Seasonal Decorating Decorate lobby and designated areas of the building to help clients feel welcomed and appreciated!		
Are you fluent in any foreign languages? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list languages: _____		
Have you ever worked for the CAC of Smith County? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, when? _____		
Have you ever volunteered at the CAC of Smith County? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, when? _____		
Have you ever been convicted of a felony or a misdemeanor? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____		
Have you ever been prohibited, reassigned, or removed from serving as an employee or volunteer with any organization or agency working with children? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____		



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References (Required) – (Non-relatives)	
Character Reference	
Full Name	Relationship
Company	Phone
Address	
Professional Reference	
Full Name	Relationship
Company	Phone
Address	

Employment	
Are you currently employed? Yes <input type="checkbox"/> No <input type="checkbox"/>	May we contact supervisor for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>
Company	Address
Phone	Supervisor
Job Title	From _____ To _____
Reason for leaving	

Disclaimer and Signature	
<p>It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's services if I have been employed/volunteering. I give the employer the right to investigate all references and to secure additional information about me, if job-related.</p> <p>I hereby release all liability of the employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information. The employer is an Equal opportunity employer. The employer does not discriminate in employment/volunteering and no question on this application is used for that purpose of limiting or excusing any applicant's consideration for employment/volunteering on a basis prohibited by local, state, or federal law.</p> <p>This application is current for 6 months. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment/volunteering, it will be necessary to fill out a new application. I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment/volunteering at any time, with or without cause and without prior notice.</p> <p>I understand that no representative of the employer has the authority to make any assurances to the contrary. I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for an appointment that would be required by the ADA.</p>	
Signature	Date