

Application for Volunteers who will have Contact with Minors

First Name	Middle Name	Last Name(s)
Alias(es) / Nickname(s)		Maiden Name (if applicable)
Date of Birth	Home Phone	Mobile Phone
Address (Street, City, State, Zip Code)		
Driver's License / Identification Number:		State:

Education (*Check highest level completed*):

☐ Elementary School ☐ Middle School ☐ High School ☐ Vocational or Technical Training ☐ University or College ☐ Graduate School

Why do you want to be a Volunteer?		
Type of ministry preferred:		
Previous volunteer experience:		
Organization	Title / Role	Responsibilities
_____	_____	_____
_____	_____	_____

Within the last 10 years have you pled " no contest " to or been convicted of a felony against a person or family, public indecency, or the Texas Controlled Substance Act?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever pled " no contest " to or been convicted of a misdemeanor against a person or family, or public indecency?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you under indictment of any criminal offense , or has a district/county attorney accepted an official complaint about offenses listed above?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you even been accused in a written complaint of inappropriate behavior with a minor?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please provide your Race/Ethnicity:

☐ White ☐ African-American ☐ Asian ☐ Hispanic ☐ Other _____

Please list three (3) personal references (*not including relatives*):

Name	Address	Telephone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Volunteer Agreement

I affirm that the information that I have provided is true and correct to the best of my knowledge.
I agree to conform with the Diocese of Brownsville rules and regulations to the best of my ability.
I agree to respect the confidential nature of case information and any personal contact with clients.
I agree to inform the Diocese if I am named in complaints or indictments or convicted of offenses listed above.
I understand that I will begin service on a reciprocal trial basis and agree to participate in orientation and training.

Signature of Volunteer _____

Date _____