



INDIVIDUAL VOLUNTEER APPLICATION & ENROLLMENT FORM

Today's Date: _____ Volunteer Identification Number (office use only): _____

Name, including maiden and others used:		
Home Phone Number:	Work Phone Number:	Mobile Phone Number:
Email Address		I prefer to be contacted by: <input type="checkbox"/> Email <input type="checkbox"/> Telephone
Street Address with Apartment Number and Subdivision Name:		
City, State and ZIP Code:		
Date of Birth (Month, Day & Year):	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Driver's License Number & State:	School (If Applicable)	
How did you hear about Interfaith of The Woodlands?		

EMERGENCY INFORMATION: Please list person to be contacted in case of emergency.

Name:		Relationship:
Home Phone:	Work Phone:	Alternate Phone:
Address:		

Skills and Experience

Why do you want to be an Interfaith volunteer?			
LANGUAGES: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Sign <input type="checkbox"/> Other _____			
Please list below any occupations or volunteer positions you have held:			
Organization/Employer	Position/Responsibilities?	Active or Inactive/Retired?	Eligible for re-hire? (Yes or No)
Please list below people we may contact in reference to you ability to volunteer:			
Name	Relationship	Contact Information	
Please list any special skills, talents, hobbies or interests:			
Do you have any conditions which might affect your ability to perform certain duties? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes," please explain.			

Criminal History

Have you ever been arrested or convicted of any criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No (Please exclude the following situations: A. Minor traffic violations for which the fine was \$200.00 or less B. Any offense which was finally settled in a Juvenile Court or under a Welfare Youth Offender Law)
If answer to above question is yes, please explain:

WAIVER/RELEASE OF LIABILITY

I certify that the information I have provided on this application is true and correct and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.

I understand that the information I have provided is subject to verification, and I give Interfaith of The Woodlands permission to obtain information relating to my criminal history record, employment history and volunteer experience, and to contact my personal references. I understand that as long as I remain a volunteer with Interfaith of The Woodlands, the criminal background check and other reference checks may be repeated at any time.

I, _____, do, for myself, my heirs, executors and assigns, release and hold harmless The Woodlands Religious Community, Inc., d.b.a. Interfaith of The Woodlands, and all of its officers, board members, staff, volunteers and clients, without any limitation or qualification, from any and all liabilities, claims, suits and actions which might be made for any losses, expenses, injuries or damages to persons or property in connection with my participation in the Interfaith’s Senior Services.

Date: _____ Applicant’s Signature: _____

Signature of Parent or Legal Guardian: _____ Date: _____
(if applicant is under 18 years of age)

MEDIA CONSENT

I consent to be photographed and/or videotaped by Interfaith of The Woodlands. I further consent to the use of those photographs or videotapes in promotion of Interfaith of The Woodlands, including, but not limited to their use in promotional literature and their release to print media, television, or other electronic media. This consent remains effective until cancelled in writing.

Printed Name: _____ Telephone: _____

Signature: _____ Date: _____

Signature of Parent or Legal Guardian: _____ Date: _____
(if applicant is under 18 years of age)

VOLUNTEER STATEMENT OF CONFIDENTIALITY

I, _____, do hereby agree to keep confidential the identity and all information pertaining to any clients that I observe in any way while volunteering at Interfaith.

Volunteer Signature

Interfaith Representative

PLEASE NOTE: Volunteers for Interfaith of The Woodlands must be at least 16 to volunteer without a parent unless otherwise indicated.

Please check the volunteer positions for which you are applying, and the specific assignments you are willing to accept:

SENIOR CARE

SENIOR SERVICES:

- Driver for Senior Transportation Program (**Must be 21**)
- Friendly Caller & Friendly Visitor
- Senior Grocery Delivery
- Office Clerical/ Phone
- Program Leaders for Art, Exercise, and Enrichment Activities
- Senior Housekeeping

MUSIC THERAPY:

- Accompanist
- Group Director/Conductor
- Transportation & Set Up with Performing Groups
- Performer

FAMILY SERVICES

- Food Pantry
- Hand Me Up Shop
 - Furniture Donations Pick Up
 - Sorting and Tagging
 - Register Assistant

DEVELOPMENT

- Office/ Clerical Assistance
- Golf Tournament Volunteer
 - Shell Houston Open
 - Administaff
- Luncheon Volunteer
- Gala Volunteer

NEW AND UPCOMING! VEGGIE VILLAGE

- Master Gardener
- Master Naturalist
- General gardening (weeding, watering, planting)
- General maintenance (equipment upkeep, repairs, etc.)
- Harvesting
- Composting
- Transporting from the garden to Interfaith of The Woodlands
- Distribution at Interfaith of The Woodlands
- Publicity/Promotion
- Teaching cooking and/or nutrition

ANNUAL OPPORTUNITIES

SHORT-TERM PROJECTS:

SENIOR COMMUNITY GAMES:

- Hospitality / sign in
- Assist in set-up / clean-up
- Game attendant / facilitator
- First aid
- Photographer

CAREGIVERS CONFERENCE:

- Assist in set-up / clean-up
- Check in
- Room Monitors
- Lunch service

HOLIDAY GIFT PROGRAM:

- Adopt a senior for gift giving
- Assist with delivery, wrapping, parties
- Adopt a family
- Interfaith Holiday Toy Drive
- Assist with late distribution set up
- Watch over waiting room
- Assist with distribution of gifts

SERVING OUR SENIORS:

- Group Leader (Over 21)
- Set-up / clean-up
- Site visitor / deliver supplies
- Photographer

SCHOOL SUPPLY PROGRAM

- Assist in setup
- Watch over waiting room

GOLF TOURNAMENTS:

- Cart Barn
- Drive Spectator Shuttles
- Sell Programs and Pairings
- Food and Beverage

Please indicate your availability and scheduling preferences below:

Call me as needed. **OR** I prefer to work regularly scheduled days and times.

Please write “no” in times you are never available, “best” on times you most prefer to work, and “?” for times you may be willing to consider on a case-by-case basis.

Times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8 a.m. - 12 noon						
12 noon- 5p.m.						

SENIOR TRANSPORTATION VOLUNTEERS

Please attach a copy of your driver’s license and proof of insurance.

NOTE: We can make copies for you when you turn in your application.

Vehicle Information

Make _____ Model _____ Year _____ Color _____



VOLUNTEER SELECTION CRITERIA

Interfaith of The Woodlands is committed to providing area senior adult residents with safe, effective volunteer services. Therefore, applicants for volunteer positions must meet the following criteria:

- ❖ complete the Volunteer Application including the Criminal Background History Screening;
- ❖ complete the Volunteer interview and orientation;
- ❖ have never been convicted of any of the following Offenses Against the Person: murder, capital murder, voluntary manslaughter, involuntary manslaughter, criminally negligent homicide, false imprisonment, kidnapping, aggravated kidnapping, rape, aggravated rape, sexual abuse, aggravated sexual abuse, public lewdness, indecent exposure, rape of a child, sexual abuse of a child, indecency with a child, assault, sexual assault, aggravated assault, aggravated sexual assault, deadly assault on a peace officer, injury to a child or an elderly individual, reckless conduct, terroristic threat, aiding suicide, or tampering with consumer products;
- ❖ have never been convicted of any of the following Offenses Against the Family: bigamy, incest, interference with child custody, enticing a child, criminal non-support, sale or purchase of a child, solicitation of a child, harboring a runaway child, or violation of a court order;
- ❖ have never been convicted of Public Indecency offenses including: prostitution, promotion of prostitution, aggravated promotion of prostitution, compelling prostitution, obscene display or distribution, obscenity, sale, distribution, or display of harmful material to a minor, or sexual performance by a child;
- ❖ have never been convicted of theft, burglary, fraud or embezzlement;
- ❖ have never been convicted of arson;
- ❖ have never been convicted of Driving While Intoxicated or Driving Under the Influence (DWI/DUI);
- ❖ must work well with people.



**CONSENT FOR CRIMINAL BACKGROUND HISTORY CHECK
AUTHORIZATION/WAIVER/INDEMNITY**

I hereby give my permission for INTERFAITH OF THE WOODLANDS to obtain information relating to my criminal history record through the VOLUNTEER CENTER OF TEXAS GULF COAST. The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history and a procedure is available for clarification if I dispute the record as received.

I, the undersigned, do, for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify The Woodlands Religious Community, Inc. and the VOLUNTEER CENTER OF TEXAS GULF COAST and each of their officers, directors, employees, and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever, and any and all related attorneys' fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become a volunteer/staff member.

APPLICANT'S SIGNATURE

DATE

PLEASE PRINT NAME

(PLEASE LIST MAIDEN NAME OR ANY OTHER NAME USED)

BIRTHDAY

SOCIAL SECURITY #

ETHNICITY

GENDER (M OR F)



CRIMINAL HISTORY SCREENING GRIEVANCE PROCESS

Please retain this for your records.

If an applicant disputes information that is on the criminal history record transcript, he/she must follow the procedure to review personal criminal history record, which includes getting fingerprints and sending the prints to DPS along with the appropriate form. If it is determined that the record is indeed the applicant's own record and the applicant feels that there is a mistake in the criminal record, a letter should be written specifying the area of concern. An investigation will be conducted to determine whether or not an error has been made.

This letter should be addressed to:

*Texas Department of Public Safety
Error Resolution Department
P.O. Box 15999
Austin, Texas 78761-5999*



Volunteer Transportation Agreement

PLEASE NOTE: This sheet only needs to be filed out if you are applying to become a DRIVER for the Seniors Transportation Program/

I affirm that I have five or more years' experience as a licensed driver.

When serving as a volunteer driver for Interfaith of The Woodlands, I will

- keep in effect automobile insurance coverage in compliance with all applicable laws;
- maintain a minimum of \$2,500.00 in Personal Injury Protection (PIP) coverage or Medical Payments Coverage;
- keep in effect a valid vehicle inspection sticker, registration and license plates, keep my vehicle in sound operating condition, and maintain a safe driving record;
- maintain a valid driver's license;
- operate the vehicle only when all occupants are properly secured by seat belts or appropriate child safety seats, as applicable;
- only transport registered Interfaith clients
- adhere to Interfaith's policies, procedures and guidelines
- immediately decline further driving assignments and inform Interfaith if I no longer conform to any of the above requirements.

Printed Name: _____

Signature: _____ Date: _____

**Please return to Andrea Berkley- Sanchez at fax: 281-292-4786 or
aberkley-sanchez@woodlandsinterfaith.org**