



Corpus Christi Community Center  
Volunteer Candidate Form

**Personal Information**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Current Employer/School \_\_\_\_\_

Are you 18 years of age or older? Yes \_\_\_ No \_\_\_ If no, what is your birth date? \_\_\_\_\_

Have you ever been convicted of any criminal offense (other than a juvenile offense which has been expunged from your record), or have you been released from prison in the last 10 years? Yes \_\_\_ No \_\_\_ If yes, please describe in full:

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

Why do you want to volunteer? (Please check all that apply)

- Do something good                       Meet new people                       Court-ordered community service
- Use or develop skills                       Gain experience in a desired field of work
- Internship requirements                       School graduation requirements
- Church program requirements                       Other (Please specify) \_\_\_\_\_

**Availability**

How many hours per week do you wish to commit to a Community Center volunteer assignment? \_\_\_\_\_ If not a weekly volunteer assignment, what schedule can you commit to? \_\_\_\_\_ How long will your initial commitment to the Center volunteer work be? \_\_\_ Six Months \_\_\_ One Year Other: \_\_\_\_\_

Please use the grid below to indicate your availability for a volunteer assignment.

Time of Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						
Evening						

**Related Background Information**

Training, Formal Education or Certifications you can apply as a volunteer:

\_\_\_\_\_



Paid or Volunteer work experience you can apply as a volunteer:

\_\_\_\_\_

Skills or Interests you can apply as a volunteer:

\_\_\_\_\_

**References**

Please supply work, volunteer or personal references. Do not list relatives

Name	Relationship to You	Address	Phone Number

In case of emergency, who should we contact (name, relationship to you, phone number)? \_\_\_\_\_

I certify that the information contained herein is correct to the best of my knowledge and understand that falsification of information or omission of significant information may be grounds for dismissal as a volunteer. I authorize the Community Center to fully investigate all information required of me or disclosed by me in this volunteer candidate form regarding suitability for a volunteer assignment at the Community Center, including, without limitation, my qualifications, character, performance, and/or ability. I understand that consumer background investigation reports, which may contain public record information related to criminal history may be requested, subject to state and federal laws and regulations. Further, I understand that the Community Center will be requesting information from various Federal, State, Local and other agencies, which may include fingerprinting, and which may contain pertinent information about my suitability to volunteer. In addition, I understand that the Community Center is committed to child abuse prevention and takes steps to identify volunteer candidates who may have abused children in its volunteer screening and policies. I agree to conform to the rules and regulations of the Community Center and acknowledge that these rules and regulations may be changed at any time, at the Community Center’s sole option and without prior notice. I HEREBY ASSUME FULL RESPONSIBILITY FOR ADRISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGES OR LOSS, regardless of severity, that I or my minor child/ward may sustain from me or my minor child/ward’s presence in, upon or about the premises or while using or observing the premises or any facilities or equipment, or participating in any program affiliated with the Community Center without respect as to location, and I, for myself, any personal representatives, assigns, heirs and next of kin, HEREBY FULLY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Corpus Christi Community Center, the respective officers, directors, Board of Managers, Trustees, members, volunteers, employees or agents and each of them from any and all claims for injuries, damages or loss that I or my minor child/ward may have or which may accrue to me or my minor child/ward.

Volunteer Candidate Signature \_\_\_\_\_ Date \_\_\_\_\_

Volunteer Candidate’s Parent/Guardian Signature if under 18 \_\_\_\_\_ Date \_\_\_\_\_