



(Please Print or Write Legibly)

Name \_\_\_\_\_  
(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

TDL # \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant's Occupation: \_\_\_\_\_

Education/Special Training: \_\_\_\_\_

Languages Spoken: \_\_\_\_\_

Have you worked with people with Special Needs? YES \_\_\_\_\_ NO \_\_\_\_\_

If Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List hobbies or special interests: \_\_\_\_\_  
\_\_\_\_\_

How did you hear about our Volunteer Program? \_\_\_\_\_

Have you done volunteer work before? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, briefly describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you hope to gain from your volunteer experience? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Shirt Size: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_

Are you volunteering to meet requirements (i.e. Community Service Hours) for a specific reason?

Please explain: \_\_\_\_\_  
\_\_\_\_\_

**Please list two personal references:**

1. Name: \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

**In case of emergency, notify:** \_\_\_\_\_

Relationship \_\_\_\_\_ Home Phone # \_\_\_\_\_ Work # \_\_\_\_\_

**Job Site Volunteers**

The following areas of interest are for positions at the New Danville site working directly with the clients. For consistency and continuity, we request a commitment of at least four (4) hours a month.

**Check area(s) of interest:**

- Miniature Horse Therapy     Gardening & Landscaping     Social Skills Training     Health & Safety
- Woodworking     Arts & Crafts     Sewing/Quilting     Drama and Music
- Food Services (Bluebonnet Bakery & Café in Conroe)
- Clerical (Administration Office in Conroe)

**Please Indicate the Day(s) and Hours you can work regularly each week**

**Please select only one option (circle your preference for time of day**

Morning Shift (9:00 a.m. – 1:00 p.m.)      Afternoon Shift (1:00 p.m. to 5:00 p.m.)

1. Please circle your 1<sup>st</sup> choice:    Monday    Tuesday    Wednesday    Thursday    Friday
2. Please circle your 2<sup>nd</sup> choice:    Monday    Tuesday    Wednesday    Thursday    Friday

**IN SUBMITTING THIS APPLICATION FOR MEMBERSHIP IN THE VOLUNTEER SERVICE PROGRAM OF NEW DANVILLE, I AM AWARE THAT SERVING AS A VOLUNTEER IS A PRIVILEGE CARRYING WITH IT HIGH TRUST AND RELATION OBLICATIONS. I AGREE TO FULFILL MY SERVICE COMMITMENT AND TO CONFORM TO ALL RULES AND REGULATIONS OF THE VOLUNTEER SERVICE PROGRAM.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**Have you ever been convicted, been on probation or deferred adjudication for any felony or misdemeanor? NO \_\_\_\_\_ YES \_\_\_\_\_**

If yes, please explain:

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

(Convictions will not necessarily disqualify an applicant – all facts and circumstances will be considered.)

**I hereby certify that all of the information contained on this application is true and complete. I authorize TNCA to contact all sources necessary to verify this information and to check references as it may see fit. I understand that any misstatement or omission on this application is cause for loss of volunteer privileges. I also understand that TNCA will do a background check and will look for criminal convictions.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**MEDIA CONSENT:**

I, \_\_\_\_\_ hereby understand that my photograph may be taken for the purpose of promotion of services at New Danville. I am aware that I will not receive payment of any kind for my participation and grant New Danville the rights to use regardless of my future association with the facility and for an unrestricted time.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Membership Dues: \$25.00

Please make checks payable to: *New Danville Ranch Hands*

Mailing Address: New Danville  
c/o Texas New Community Alliance  
P.O. Box 7181  
The Woodlands, TX 77387-7181