



Girls Incorporated of Greater Houston
Program Volunteer Application

Potential volunteers are required to complete an application, and may be required to participate in an interview, agree to release information leading to a criminal history and reference check. Volunteers will receive notification of their acceptance into the Girls Inc. volunteer program. Each accepted volunteer will be provided with a training session, project description and all resources needed prior to beginning their assignment. Girls Incorporated reserves the right to decline a volunteer application for any reason at any time.

PERSONAL INFORMATION

Last Name:		First Name:		Middle Initial:
Date of Birth: / /	Sex: (Optional)	Ethnicity: (Optional)		
Address:		City:	State:	Zip
Home Phone ()		Work Phone ()		Cell Phone ()
Email address:				
Current place of work:			Occupation:	
Do you have any Special Healthcare Conditions?		<input type="checkbox"/> NO	<input type="checkbox"/> YES	If yes, please specify:

List any special accommodations associated with your health condition that may be needed.

Emergency Contact: Person:	Phone:	Relationship:
Have you been convicted of a felony offense or been placed on deferred adjudication?		<input type="checkbox"/> NO <input type="checkbox"/> YES
If yes, please explain:		

How did you learn about Girls Inc.?

- Volunteer Fair
- Current Volunteer
- Website / Internet Search
- Friend
- School
- Other _____

EDUCATION AND TRAINING

Please circle highest level completed:

High School Graduate Associate's Degree Bachelor's Degree Master's Degree Doctorate

Specialized Training:

PREVIOUS VOLUNTEER EXPERIENCE

Please include information from your most current volunteer experiences.

Institution Name	Duties/activities performed	Duration



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REFERENCE 1 *(Please provide 2 references)* **REFERENCE 2**

Name:	Name:
Title:	Title:
Phone:	Phone:
Relationship:	Relationship:

INTERESTS **EXPERIENCE** **ABILITIES**

- Volunteer Instructor
- Expert Guest Speaker in:
 - Science Field
 - Financial Field
 - Health Field
 - Entrepreneurship

- Cooperating with youth on projects
- Making presentations to small and large groups
- Taking direction from children and teenagers

- Fluent in another language: _____
- Able to commute to program locations
- Able to lift 20-25lbs without assistance

Please list skills that you possess that you would like to use as a volunteer.

TIME COMMITMENT / AVAILABILITY **TIME COMMITMENT / AVAILABILITY**

Mornings (9:30am – 1:00pm)					Afternoons (1:00pm – 4:30pm)				
MON	TUES	WED	THU	FRI	MON	TUES	WED	THU	FRI

***Program volunteer positions vary and are available Monday through Friday between 9:30am-4:30pm and generally require weekly commitments of 2 hour increments.**

VOLUNTEER PERMISSIONS

May we use your photograph in Girls Incorporated print and Internet marketing materials?

- Yes No, thanks

SIGNATURE

I hereby, acknowledge that the information contained in this application is accurate and correct to the best of my knowledge.

Applicant Signature: _____ Date: _____

For administrative purposes only:

Received: ___/___/___ Reply: ___/___/___
 Interview: ___/___/___ Reply: ___/___/___
 Orientation: ___/___/___ Reply: ___/___/___
 Training: ___/___/___ Reply: ___/___/___

Background : ___/___/___ Approved Denied
 References Checked: ___/___/___
 Volunteer Agreement: Yes No
 Initial Placement: _____
 Active: ___/___/___
 Separation: ___/___/___

Notes:

