



*Judge Dan A. Gattis  
Williamson County Courthouse  
710 Main Street, Ste. 101  
Georgetown, TX 78626*

*March 27, 2019*

*The Honorable Judge Bill Gravell and Williamson County Commissioners:*

*I am requesting the Commissioner's Court approve the appointment of two new board members, K.C. Bumpas of Round Rock and Cathy Hord of Jarrell, to the Williamson County Child Welfare Board, for the 3 year term from October 2019 to September 2022. I have included their application forms for you to look over.*

*Please place this request for approval for the two appointments on your agenda at your earliest convenience.*

*Please call or email me with any questions you might have. Thank you so much for your time and the attention you give to our board and in turn enable us to partner with Williamson County to help care for the foster children of Williamson County!*

*Respectfully Submitted,*

*Dianne Howell-WCCWB, President  
255-6594-home  
512-636-0908-cell  
JRZONE@aol.com*



# Volunteer Application

Texas law gives you the right to know what information is collected about you by means of a form you submit to a state government agency. You can receive and review this information, and request that incorrect information about you be corrected, by contacting the person or unit to whom you submitted this form."

Name (Last, First, Middle) <u>HORD, Catherine Ann</u>	Preferred Name <u>Cathy</u>	Date of Birth [REDACTED]	Home Telephone [REDACTED]
Address (Street, City, State, ZIP Code) <u>[REDACTED] Jarrell TX 76537</u>			County <u>Williamson</u>
Other Names Used/Known By (list any other names (aliases) you have used, such as maiden name, previous married name, etc): <u>Catherine McCammon</u>		Organization Represented (if applicable):  <u>Nancy Zenner</u>	

Why do you want to volunteer for DFPS?  
help children in need & their families

Applicable skills:

Type of volunteer service preferred: child welfare board

Are you willing to receive training for another assignment?  Yes  No

### Education (Check highest level completed):

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

Intems:   
 undergraduate   
 graduate   
 post graduate

University Tarleton      Date of undergraduate degree 1976      Date of graduate degree 1978

### Additional Languages (list):

	Speak	Read	Write
<u>Spanish</u>	<input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent	<input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent	<input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
<u>American Sign Language</u>	<input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent <input type="checkbox"/> NA	<input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent	<input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent

### Previous volunteer experience:

Organization: <u>GISD drop out prevention</u>	Position: <u>volunteer</u>	Responsibilities: <u>meet &amp; encourage student attendance</u>
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### Date(s) and time(s) available:

Days per week: Tuesdays

Hours per week: 3

Comments:



# Volunteer Application

### Are you presently employed?

Yes  No

If yes, where? \_\_\_\_\_

Work Telephone \_\_\_\_\_

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

Occupation: \_\_\_\_\_

### Prior employment:

Company: \_\_\_\_\_

Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Georgetown ISD

teacher/asst. principal

### Can you provide transportation for others?

Yes  No

If yes, please complete Transportation Form 250c

### Please list three (3) personal references (excluding relatives):

Name:

Address:

Telephone #:

Claudia Doerfler

Naomi Chadwick

Nancy Zenner

### 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 Texas Department of Family and Protective Services 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 department if I am named in complaints or indictments or convicted of offenses.
- I understand that I will begin service on a reciprocal trial basis and agree to participate in orientation and training.

Catherine Hard  
Signature of Volunteer

1-24-19  
Date

### In case of emergency, please notify:

Name <u>Billy Hard</u>	Relationship <u>Spouse</u>	Telephone # [REDACTED]
Address <u>same</u>		



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Name (Last, First, Middle) <u>Bumpas, Kathleen Claire</u>	Preferred Name <u>K.C.</u>	Date of Birth [REDACTED]	Home Telephone [REDACTED]
Address (Street, City, State, ZIP Code) <u>[REDACTED] Round Rock TX 78664</u>			County <u>Williamson</u>
Other Names Used/Known By (list any other names (aliases) you have used, such as maiden name, previous married name, etc): <u>Kathleen Claire Springer (maiden)</u>	Organization Represented (if applicable):	Who referred you to DFPS?	

Why do you want to volunteer for DFPS?  
to focus on something outside the comfort of my home/community to help other

Applicable skills: previous experience w/ volunteer boards, good organizational skills

Type of volunteer service preferred: Williamson County Child Welfare Board

Are you willing to receive training for another assignment?  Yes  No

### Education (Check highest level completed):

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

Interns:   
 undergraduate   
 graduate   
 post graduate

University \_\_\_\_\_   
Date of undergraduate degree \_\_\_\_\_   
Date of graduate degree \_\_\_\_\_

### Additional Languages (list):

	Speak			Read			Write		
	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
American Sign Language	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent

### Previous volunteer experience:

Organization: <u>Keller Williams Agency Leadership Council</u>	Position: <u>member</u>	Responsibilities: <u>training, organization</u>
<u>Gateway School All Sports Booster Club</u>	<u>Vice President - Communications</u>	<u>fundraising, organization</u>

### Date(s) and time(s) available:

Days per week: 1-2

Hours per week: 3-4

Comments: I have a full time job & 2 children (10/12) but hours are flexible at work



# Volunteer Application

### Are you presently employed?

Yes  No

If yes, where? Kelker Williams RR Work Telephone 512.255.5050  
 Address: 2300 Greenhill Dr. #200 Round Rock TX. 78664  
 Occupation: Reactor

### Prior employment:

Company:

JCPenney

Position:

Customer Service Supervisor

Responsibilities:

training/schedules

### Can you provide transportation for others?

Yes  No

If yes, please complete Transportation Form 250c

### Please list three (3) personal references (excluding relatives):

Name:

Nichole Varljen

Address:

Telephone #:

Sherry Rhoden

Christi Myhill

### 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 Texas Department of Family and Protective Services 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 department if I am named in complaints or indictments or convicted of offenses.
- I understand that I will begin service on a reciprocal trial basis and agree to participate in orientation and training.

Signature of Volunteer

Date

2/15/19

### In case of emergency, please notify:

Name

David Bumpas

Relationship

husband

Telephone #

Address