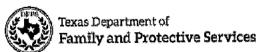


VOLUNTEER APPLICATION

Purpose: Use this form to apply to volunteer with the Department of Family and Protective Services (DFPS). **Directions:** Complete this form and submit it to your local volunteer coordinator in person or via mall or email. **Note:** A Social Security number is required to complete this form.

VOLUNTEER INFORMATION						
Name (last, first, middle): Cantu, Brandi, N.	Preferred name Brandi	Date of birth:	Place of birth (city, state):			
Other names or spellings Used (married, maiden, alias, for example:						
First, middie, last Brandi Cantu Lopez						
☐ No Other Names						
Current address (street, city, state, ZII	P_code):		County: Williamson			
Have you had any other residences in Texas in the past two years? Yes No If "yes," list them below (street address, city and county, and ZIP code — use an additional sheet if needed):						
Have you lived outside Texas in the past 2 years? Driver license, s		tate, and number:	Social Security number:			
Yes						
☑ No						
Alternate ID #: Type of alternate ID: Canadian SIN Military ID Passport Permanent residency card State photo ID						
Home telephone:	Mobile telephone:		Email address:			
Gender:	Race (check all applicable):		Ethnicity:			
☐ Male	Asian		Hispanic			
✓ Female	American India	n/Alaskan Native	Not Hispanic			
	☐ Native Hawaiian/Pacific Islander		Unable to determine			
	Black					
	☑ White					
	Unable to determine the above)	rmine (or none of				
Organization represented (if applicable):		Who referred you to DFPS? Tamara Wahrer				
Why do you want to volunteer for DFPS?						
I want to be able ot help and support families	in need.					
Applicable skills:						
Proficient in google and microsoft suites. Proficient in Canva. I am open-minded and willing to help explore new ideas for the origanizat						
Type of volunteer services preferred: I am open to any volunteer services.						
Are you willing to receive training for another assignment? Yes No						

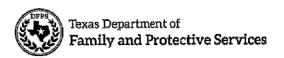


EDUCATION (CHECK HIGHEST LEVEL COMPLETED)					
Elementary school M	iiddle school	ool 🔲 Voca	tional training		
	ollege Graduate				
	Undergraduate Graduat	e Post graduat	e		
University:		Date of undergraduate		Date of graduate	
Sam Houston State University		degree:		degree:	
Texas A&M Central Texas		A N. C. I. A. C. C. C.			
	ADDITIONAL L	ANGUAGES			
Language	Speak	Read		Write	
	Fair	Fair	Fair		
	Good	Good	Good		
	Excellent	Excellent	Excellen Fair	ι	
	Fair	Fair Good	Good	1	
	Good	Excellent	Excellen		
	Excellent Fair Good Excellent	Lambs	LXCEIICI		
American Sign Language:	PREVIOUS VOLUNT				
	PREVIOUS VOLUNI	LER EXI LIBERTOR			
Organization		Positio	n .	Responsibilities	
	DATE(S) AND TIM				
Days per week: 2 days per w	eek (more if needed)	Hours per week: Any	ytime outside	of working hours 8-4	
Comments: I am a school counselor and am not avilable during working hours to voluneteer. Our hours are Monday- Friday from 8 am to 4 pm.					



ELECTRONIC SIGNATURE FOR VOLUNTEER AGREEMENT

I understand that I am requesting volunteer placement requiring criminal history and Central Registry checks, and I authorize DFPS to complete these checks.					
☑ I authorize DFPS to run an FBI criminal history check, which requires fingerprinting, if my role will have access					
to criminal history information.					
I understand that background checks are conducted on annually for DFPS volunteers. I authorize DFPS to conduct a criminal history and Central Registry check each year that I volunteer with DFPS.					
✓ I understand that children in DFPS care have experienced trauma in their lives.					
·					
I understand this trauma may manifest itself in extreme behaviors, which include foul language, outbursts, and					
physical aggression.					
I understand that my signature on this Electronic Signature Acknowledgement form is equivalent to my handwritten signature and is legally binding. An electronic signature has the same validity and meaning as my handwritten signature. I will not, at any time, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding. I acknowledge and warrant the truthfulness of the information provided in this document.					
Electronic signature of volunteer:	Date signed:				
	1/19/20				
X Hante					



CHECKLIST FOR VOLUNTEER COORDINATORS				
For all volunteers: Complete volunteer application form and enter information in tracking system. Check personal references using telephone or mail reference check forms. Review Volunteer and Community Engagement Policy Handbook, sections 4000–8000. Select job placement with volunteer. If appropriate, complete background check. Complete Transportation Form 250c (if transporting or performing essential driving duties as an official part volunteer duty description). Review duties with volunteer. Review DFPS Volunteer Guidebook and Work Rules and Standards of Conduct. Review and sign Confidentiality Agreement (Form 251). Arrange on-the-job and formal training, when appropriate. Instruct volunteers to send you hours worked at the end of each month and enter them into the volunteer management site, VOMO.				
For volunteers with direct client contact or access: Conduct criminal history and Central Registry check. Instruct volunteer to complete online direct-service trainings and sign Form 0249. The training and forms can be found at https://www.dfps.state.tx.us/Community/Volunteer/training.asp. For volunteer transporters and essentials drivers: Check auto insurance, valid driver license, and driving record, in accordance with Sec. 8600 of VCE Handbook. If the volunteer or intern will have access to any criminal history information, request fingerprinting for an FBI check.				
For volunteers selected for computer access (see section 5800 of VCE Handbook): Conduct criminal history and Central Registry check. If the volunteer or intern will have access to any criminal history information, request fingerprinting for an FBI check. Completed Non-DFPS Staff Computer Security Agreement (Form 4047). Schedule volunteer for appropriate computer training. Complete Move/Add/Change (eMac).				
SUPERVISOR OR VOLUNTEER COORDINATOR INFORMATION				
Supervisor name:	Unit/Location:			
Volunteer coordinator name:	Unit/Location:			