



American Red Cross

# Chisholm Trail Chapter

Proudly serving 23 counties across Texas.  
www.chisholmtrail.redcross.org



## Volunteer Application

Date		Date of Birth	
Last Name		First	Middle Initial
Address		City	State Zip Code
Contact Phone		E-Mail Address	
Current Employer		Occupation	
Volunteer Experience:	Organization Name/Location	Roles/Duties/Training:	From: To:
Current License(s) & Certifications Held:	Type & Number	Issuing Entity:	Expiration Date(s):
Education:	Institution Name & Location	Degree/Major	Date Attended
Language other than English (specify):		<input type="checkbox"/> Speak only <input type="checkbox"/> Read only <input type="checkbox"/> Fluent	
Emergency Contact			
Name		Phone	Relationship
Availability: Please mark hours available:			
Monday	Tuesday	Wednesday	Thursday
<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
Friday	Saturday	Sunday	
<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	
Fields of Interest (check all that apply): More information will be given on these at the orientation training.			
<u>Emergency Services</u> <b>Disaster Services</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> DAT</li> <li><input type="checkbox"/> Strike Team</li> <li><input type="checkbox"/> DSHR</li> <li><input type="checkbox"/> Canteen</li> <li><input type="checkbox"/> Instructors</li> </ul> <b>ISS</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Case Research</li> <li><input type="checkbox"/> Deliver Messages</li> <li><input type="checkbox"/> Committee Members</li> </ul> <b>AFES</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Caseworkers</li> <li><input type="checkbox"/> Administrative</li> <li><input type="checkbox"/> Data Entry</li> <li><input type="checkbox"/> Presentations</li> <li><input type="checkbox"/> Phone Bank</li> <li><input type="checkbox"/> Call Center Mgmt.</li> </ul>	<u>Health Services</u> <ul style="list-style-type: none"> <li><input type="checkbox"/> Phones</li> <li><input type="checkbox"/> Data Entry</li> <li><input type="checkbox"/> Presentations</li> <li><input type="checkbox"/> Instructors</li> <li><input type="checkbox"/> Mannequin Cleaners</li> </ul> <b>Wheels</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Phones</li> <li><input type="checkbox"/> Data Entry</li> <li><input type="checkbox"/> Mechanical Advisor</li> <li><input type="checkbox"/> Scheduler</li> <li><input type="checkbox"/> Vehicle Maintenance</li> </ul>	<u>Administration Dept.</u> <b>IT</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Programmer</li> <li><input type="checkbox"/> Trouble Shooter</li> </ul> <b>Accounting</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Filing</li> <li><input type="checkbox"/> Scanning</li> </ul> <b>Facilities</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Maintenance</li> </ul> <b>Administrative</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Reception Phones</li> <li><input type="checkbox"/> Data Entry</li> </ul> <b>Volunteer Services</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Data Entry</li> <li><input type="checkbox"/> Filing</li> </ul>	<u>Marketing</u> <ul style="list-style-type: none"> <li><input type="checkbox"/> Design</li> <li><input type="checkbox"/> Spokespersons</li> <li><input type="checkbox"/> Committee Members</li> <li><input type="checkbox"/> Website</li> </ul> <b>Fund Development</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> FD Committee Members</li> <li><input type="checkbox"/> Data Entry</li> <li><input type="checkbox"/> Administrative</li> <li><input type="checkbox"/> Special Events Support</li> </ul>

**Previous Red Cross Experience**

Have you ever worked as a Red Cross employee?  Yes  No (If yes, give position, dates, and location.)

Have you ever worked as a Red Cross volunteer?  Yes  No (If yes, in what function and where?)

Have you ever held any Red Cross certification?  Yes  No (If yes, please list.)  
Has your American Red Cross certification ever been revoked?  Yes  No If yes, please explain

**A "yes" answer to the following italicized questions does not necessarily disqualify an applicant.**

Are you licensed to operate a motor vehicle in this state?  Yes  No

Has your license to operate a motor vehicle ever been revoked?  Yes  No If yes, please explain.

Have you ever been bonded?  Yes  No Has your bonding ever been revoked?  Yes  No If yes, please explain

Have you ever been convicted of a felony or misdemeanor within the past 24 months, which resulted in imprisonment?  Yes  No If yes, please explain.

I do hereby give the American Red Cross permission to inquire into my educational background, references, driving record, police records, employment, and/or volunteer history. I further give permission to the holder of any such records to release the same to the American Red Cross.

I do hereby hold the American Red Cross harmless from any liability, whether civil or criminal, that may arise as a result of the release of this information about me. I further hold harmless any individual, agency, business, or corporation that provides information or documents to the above-named American Red Cross unit. I understand that the American Red Cross will use this information as part of its verification of my volunteer application and periodically for evaluation purposes.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Consent of parent/guardian for under age 18

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please complete your background check.**

Everyone will need to know their full names, current addresses, e-mail addresses (if you have one), and telephone numbers as well as:

- 1) social security number or other government ID
- 2) driver's license number (if you have one)
- 3) date of birth
- 4) mother's maiden name

**Once you've gathered the information you need, please go to this secure website:**

<https://www.MyBackgroundCheck.com/ArcVts/>

**Red Cross Unit of Affiliation: Chisholm Trail Chapter**



**American Red Cross**

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Date Completed