

Henderson County Teen Court ADULT VOLUNTEER APPLICATION FORM

Print All Information Clearly

Name _____ Date _____

Male / Female *(Circle one)* Birthdate _____ DL # _____

Address _____

City _____ TX Zip Code _____

Home # _____ Cell # _____

Work # _____ Email _____ @ _____

Employment History

Company Name/Phone No.	Job Title	Dates of Employment

Experience History

Degree/Certificate/Skill	Issuing Institution/Agency	Date

Volunteer History

Agency/Phone No.	Job	Dates of Service

Personal References (Three people who are not relatives)

Name	Address	Phone Number

Do you have a history with any conviction(s) for offenses higher than a Class C misdemeanor?

Yes No (circle one) *An applicant's background may be verified by a criminal history review underwritten by the applicant. Applicant will be requested to submit a nominal fee for the criminal history review. An applicant's refusal to submit the fee within ten (10 days) of request or refusal to sign Consent for Criminal Background Check on this application will disqualify the applicant for consideration as a volunteer of Henderson County Teen Court.*

Briefly describe why you are interested in volunteering or describe how you believe you can best serve Teen Court and its educational programs:

I hereby acknowledge that the information submitted herein is correct to the best of my knowledge. I understand that any falsification of information prohibits my participation in or immediate dismissal from volunteer services for Henderson County Teen Court.

I grant my permission for a representative of Henderson County Teen Court Board of Directors and/or the Court Coordinator to contact the above references and to verify all information.

I also extend my permission to all individuals, organizations, and agencies contacted to provide all pertinent information in determining my suitability for volunteer services.

_____ Date

_____ Signature of Applicant

OATH OF CONFIDENTIALITY

I solemnly swear that I shall keep CONFIDENTIAL any specific information which comes to my knowledge in the course of a Teen Court case presentation, and I shall not identify, directly or indirectly, either audibly or in writing, any person participating as a defendant in the Teen Court program. I also understand that this Agreement is binding and remains in full effect even if I discontinue participation in Teen Court.

CONSENT TO USE PHOTOGRAPHS

Henderson County Teen Court may periodically have photographers from Teen Court, media entities, and/or other parties take photographs for use in news stories, program literature, the Teen court website, or for other purposes.

Please initial below if you consent to having:

Your photograph taken and used: _____

Your name used in the caption of a photo: _____

CONSENT FOR CRIMINAL BACKGROUND CHECK

To ensure the safety of the children involved in Teen Court, it is necessary to conduct a background check on adult volunteers. Please sign below in the space provided if you understand a background check may be conducted using the information you have provided, and that the decision of whether or not to accept you as a volunteer is at the sole discretion of the Teen Court Board of Directors or Teen Court Coordinator, and you consent to the same.

_____ Date

_____ Signature of Applicant

Please return at your earliest convenience to:

HENDERSON COUNTY TEEN COURT
 P. O. BOX 227
 ATHENS, TX 75751
 903.489.1143
 courtcoordinator@teencourtathenstx.org

If you have further questions, contact Lana Perkins at: