

Dear Prospective Volunteer,

Thank you for your interest in volunteering at the Methodist Children's Home. Please complete the attached application and return it to me at your convenience. You can either print and mail the form, or submit it via email (kwolfe@mchwaco.org).

Once your application has been received and reviewed I will call you to schedule a time for us to meet sign the paperwork required to obtain a background check, have an interview and give you some more information about the volunteer application process. We will also talk about the best time for you to complete a drug screening and a TB test.

After that is complete, I will call or e-mail the references you provided and make a decision about your volunteer placement.

Each volunteer is required to attend an orientation and training session provided several times annually to prepare you to work with the youth at the Methodist Children's Home. The next training date will be provided to you at the time of your acceptance.

Thank you again for your interest in serving our youth. I look forward to working with you.

**Warmest regards,
Katie Wolfe, MSW**

**Volunteer Services Coordinator
1111 Herring Ave
Waco, Texas 76708
254.755.4694
kwolfe@mchwaco.org**

Methodist Children's Home Volunteer Application

Name (First, Middle, Last):

Address :

E-Mail Address:

Cell Phone:

Other Phone:

Date of Birth:

Race/Ethnicity:

Have you graduated from high school? Yes No If so, where?

Have you ever attended a college or university? Yes No

If so, where?

Degree:

Have you lived in any cities outside of Texas in the last 5 years? Yes No

If so, where?

Please list any previous addresses OUTSIDE THE STATE OF TEXAS including county:

Driver's License Number:

State:

Type:

Do you have minimum liability insurance coverage required by state law? Yes No

Car Insurance Carrier:

Policy Number:

Have you ever been CONVICTED of a felony or misdemeanor in the past 10 years or have criminal charges currently pending? Yes No

If so, explain the nature of those charges.

Working with a child at the Methodist Children's Home is demanding and requires that volunteers be in strong mental and physical health. Are there any circumstances that make you unable to meet those requirements? Yes No

If so, please explain:

Do you have a history of substance abuse? Yes No

If so, please explain:

Describe your work or volunteer experience with youth:

Why do you want to volunteer at the Methodist Children's Home?

Availability

Hours per week:

Per month:

I prefer weekdays: Yes No

I prefer weekends: Yes No

Emergency Contact

In an emergency, Methodist Children's Home should notify:

Name:

Phone 1:

Phone 2:

Relationship:

My closest living relative is:

Name:

Phone 1:

Phone 2:

Relationship:

What are your gifts, interests and talents?

What about you would make you a good volunteer?

Personal References

Name:

Phone 1:

Phone 2:

E-Mail Address:

Relationship:

Personal References (continued)

Name:
Phone 1:
Phone 2:
E-Mail Address:
Relationship:

Name:
Phone 1:
Phone 2:
E-Mail Address:
Relationship:

Name:
Phone 1:
Phone 2:
E-Mail Address:
Relationship:

Mentor Applicants Only

Please describe the age and gender of a student you would like to work with:

Are you willing to commit to spending at least one calendar year in a mentoring relationship with a youth from the Methodist Children's Home? Yes No

If no, please explain:

Please send your completed application by mail, e-mail or fax to:

**Katie Wolfe, MSW
Volunteer Services Coordinator
1111 Herring Ave
Waco, TX 76708
kwolfe@mchwaco.org
Fax: 254.750.1300**