RGV Road to Recovery VOLUNTEER APPLICATION

Volunteering with our organization may put you in direct contact with minors. To ensure their safety, we require a detailed application process that includes reference and background checks. Please help us protect our young people by being truthful in this application. To apply please download the two forms, complete them and return by email to <u>office@rgvroadtorecovery.org</u>. Thank you for your interest.

		Date of Birth
Address		
City, State, Zip C	Code	Social Security Number
Home Phone Nur	nber	Cell Phone Number
Email Address		
Drivers License N	lumber	State of Issue
1. Occupation, Cu	urrent Employer, Business Address	and Phone Number:
2. List informatio	on of three personal references who	may be contacted. Personal references may <u>not</u>
	on of three personal references who a embers of our staff.	may be contacted. Personal references may <u>not</u>

3. Where have you lived during the past seven years (list dates and addresses)?

4. Please describe your background working with the program or age group. Include information about volunteer and paid experiences:

6. Please list groups within the community in which you are currently active:

7. How do you deal with conflict and confrontation?

8. What do you consider appropriate methods of discipline for young people?