



City of McAllen Volunteer Application

VOLUNTEER ELIGIBILITY REQUIREMENTS

- ❖ Must reside in the State of Texas within 90 days
- ❖ Must be 16 years of age or older (with parental/guardian consent)

Name: _____
Last First Middle

Address: _____
Street Apartment/Unit

_____ City State Zip Code

Daytime Telephone: _____ Evening Telephone: _____

E-mail address: _____

List other names which you are known by: _____

Location and Date of Birth: _____

Social Security Number: _____

Do you drive? Yes _____ No _____ License # _____ State _____

Do you have access to transportation if you do not drive? Yes _____ No _____

Why do you wish to volunteer for the City of McAllen?

How did you hear of this volunteer opportunity?

Have you previously submitted an employment or volunteer application with the City of McAllen? Yes _____ No _____

If so, please indicate date and last position applied for _____

Have you ever been employed by the City of McAllen? Yes _____ No _____

If yes, please provide dates of Employment Position/Title Name of Supervisor:

EDUCATIONAL BACKGROUND

List the Highest level of education that you have completed:

- Elementary GED/ HS Equivalency Associates Degree Masters Degree
 High School Diploma Some College Bachelors Degree PHD

CURRENT EMPLOYMENT OR VOLUNTEER POSITION(S)

Please list all current employers, dates of employment, position(s) held, description of work performed, name(s) of supervisors, firm's complete address, and applicable telephone numbers.

Employer or Volunteer Organization: _____

Address: _____

City _____ State _____ Zip Code _____

Telephone Numbers: _____

Name and Title of Supervisor: _____

Job Title/Position: _____

Dates of Employment: From _____ To _____

Position Description—*Please summarize responsibilities.*

AVAILABILITY

Date available to start volunteering: _____ Month _____ Day _____ Year

List days and hours available:

Days	Hours	Days	Hours
Monday		Friday	
Tuesday		Saturday	
Wednesday		Sunday	
Thursday			

List any special skills, licenses, certifications, trade, awards, publications, or other relate item:

- | | | |
|--|--|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Fund-Raising | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Internet Research | <input type="checkbox"/> Receptionist |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Statistical Research |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Library Research | <input type="checkbox"/> Translation/Languages |
| <input type="checkbox"/> Database Management | <input type="checkbox"/> Microsoft® Office | <input type="checkbox"/> Typing WPM |
| <input type="checkbox"/> Desktop Publishing | <input type="checkbox"/> Office Equipment | <input type="checkbox"/> Writing/Editing |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Photography | <input type="checkbox"/> Other |
-

General Background Information:

You are authorizing the City to conduct a criminal history investigation of your record. This investigation will disclose your complete criminal history including all arrest data.

Have you ever been arrested for or convicted of a felony?

- Yes No

Have you ever been arrested for or convicted of any violation of the law?

- Yes No

Have you ever been subjected to a deferred adjudication on a felony or misdemeanor charge?

- Yes No

If you answered 'YES' to any of the above questions, please explain in concise detail in the box below, indicating the dates and nature of the offense, the name and location of the court and the disposition of the case(s).

A conviction may not disqualify you, but a false statement or failure to disclose may.

The City of McAllen is an equal opportunity employer and does not discriminate on the basis of race, color, gender, religion, age, sexual orientation, national or ethnic origin, disability, marital status, veteran status, or any other occupationally irrelevant criteria. The City of McAllen promotes affirmative action for minorities, women, disabled persons, and veterans.

If special accommodations are necessary please contact the Human Resource Department at 956-681-1045.

I hereby affirm that the information provided on this application and resume (if attached) is true and complete to the best of my knowledge, and understand that falsified information or significant omission(s) may disqualify me from further consideration for any City of McAllen volunteer opportunities.

Signature: _____ Date: _____

Parent/ Guardian must sign if under the age of 18.

Signature: _____ Date: _____

Please return all completed and signed applications to:

City of McAllen Human Resource Department
1300 Houston Ave.
McAllen TX 78501

HR Office Use Only:	
Received: _____	
Approved: <input type="checkbox"/>	Disapproved: <input type="checkbox"/>
Signature: _____	Date: _____

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