



*Fannin County Family Crisis Center*

118 East Sam Rayburn Drive  
Bonham, Texas 75418

Office: 903-583-7694 Fax: 903-583-3036

Hotline: 903-583-7000

[www.fccrisiscenter.org](http://www.fccrisiscenter.org)

[kcfcfcc@frontier.com](mailto:kcfcfcc@frontier.com)

**Volunteer Application**

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

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

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Occupation: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Available Months: \_\_\_\_\_ Days: \_\_\_\_\_

Times of availability: \_\_\_\_\_

Do you speak other languages? \_\_\_\_\_

Previous Volunteer Experiences: \_\_\_\_\_

Volunteer work activities available (check applicable ones)

Clerical work

Interpreter

Fundraising

Hotline Counseling

Resource Fair

Babysitting

Technical (computer) assistance

List two personal references and one employment reference.

Personal references:

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Employment references:

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

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Fannin County Family Crisis Center's mission is to work with victims of violent crimes and their families. I understand that certain steps must be taken to protect these victims. I hereby give my permission for a background check, a driver's license check, and a drug/alcohol screen. Any offer of employment or of volunteer privilege is contingent on the results of background checks.

Furthermore, I agree to clearances by law enforcement (criminal background checks) and the Texas Department of Protective & Regulatory Services and Children's Protective Services by means of a computer check.

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Signature

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Date

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Last name

First name

Middle name

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Address

City

ST

Zip

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Date of Birth

DL state and Number