



## Collin County District Attorney's Office Volunteers in Prosecution Application



Name (Last, First, Middle):	Home Phone:	Business Phone:
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Home Address:	City, State:	Zip Code:
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<b>Marital Status:</b> <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Spouse's Name(s) at birth or before marriage:
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**EDUCATION:**

<b>Do you have (check one)</b> <input type="checkbox"/> G.E.D. Certificate <input type="checkbox"/> High School Diploma	When and where did you receive it?
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<b>Are you a student:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	If "YES", what degree are you working toward:
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**College(s) you have attended or received a degree from.**

Type of Degree	Major/Minor	School	Date Received or Dates Attended

**EMPLOYMENT HISTORY:** (show all employment beginning with most recent employer. Use continuation sheet if needed)

Date of Employment From/To (Month and Year)	Name and Address of Employer (street, city, state)	Job Title/Duties	Reason for Leaving

**Military:**     Yes     No    If "Yes", specify (including Reserve or National Guard):

<b>Honorable Discharge:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Entered:	Date Separated:
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**CRIMINAL HISTORY AND DRIVING RECORD:**

**Are you a citizen of the United States?**     Yes     No

<b>Has your drivers license ever been suspended or revoked?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	State/DL#: _____
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<b>Have you ever been convicted of a crime?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Exp. Date: _____
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**POLICE CONTACT:** List all incidents in which you were cited, arrested, accused or charged with a crime **other than traffic violations**. Include incidents that occurred as a juvenile, including any that were expunged, set aside, referred to pretrial diversion or pardoned. (provide a full explanation on continuation sheet).

Date	Location	Police Agency	Original Charge	Charge Reduced To	Disposition/ Court Action

**Please answer the following questions. Use the continuation sheet to explain if any "YES" answers.**

**Is any member of your family or domestic partner:**

Under prosecution by any government agency?     Yes     No

In jail, prison, on probation or on parole?     Yes     No

An attorney or private investigator?     Yes     No

**PERSONAL REFERENCES:**

**List at least three people who have known you for over one year, excluding relative or former employers.**

Name	Years Known	Street Address	City, State, Zip Code	Home Telephone	Work Telephone

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

<b>Please list all immediate family members that have been arrested and/or convicted of a felony or misdemeanor.</b> Immediate family is spouse, father, mother, brother, sister, son or daughter. (Use continuation sheet if needed )				
Name	Street Address	City, State, Zip Code	Home Telephone	Relationship

**List Community services, social/fraternal and school organizations that you are presently or have participated in the past.**  
(Please indicate positions you held in these organizations)


**TELL US ABOUT YOU...**

**Previous or present volunteer experience:**

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**What kinds of volunteer jobs are you most interested in at present?**

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**List hobbies, special interests, languages or special skills.**

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**List office equipment/software you have experience in.** (i.e. Microsoft Word, Excel, PowerPoint, typewriter, copy equipment)

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**How did you hear about our volunteer program?**

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**To ensure you are placed in an appropriate position, please check any of the following that apply.**

Weight limitations while lifting.  Problems bending while filing.  Limitations standing for long periods of time.

**Specify preference for availability to volunteer.**

How many days a week would you like to volunteer?

Do you you prefer?  Mornings  Afternoons Other \_\_\_\_\_

**Any comments you would like to make that would help in our decision to have you volunteer with us?**

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\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\*Please include a copy of your Driver's License and submit it with your application.

**CERTIFICATION:**

In signing, I do hereby certify that all information contained in this application is correct and accurate to the best of my knowledge. I further authorize the Collin County District Attorney's Office to verify criminal history and driving records as part of the background process. If accepted to perform volunteer duties for the Collin County District Attorney's Office, I understand that I may be proxy to confidential information and promise to respect and maintain all that confidentiality whenever presented with it.

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## Consent For Criminal Background Check/Authorization/Waiver/Indemnity

**The District Attorney's Office must perform criminal background checks on our Volunteers because of the matters of the population we serve. Please read and sign this consent form authorizing the District Attorney's Office to perform a criminal background check.**

I hereby give my permission for the Collin County District Attorney's Office to obtain information relating to my criminal history record. The criminal history record, as received from reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for being a volunteer with this organization. I also understand that as long as I remain a volunteer here, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by the District Attorney's Office and a procedure is available for clarification, if I dispute the record as received. If there is a dispute you will make an appointment with First Assistant Greg Davis.

I, the undersigned, do, for myself, my heirs, executors, and administrators, hereby remise, release, and forever discharge and agree to indemnify the Volunteer in Prosecution Program and each of their officers, directors, personnel, and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts, and sums of money, claims and demands, whatsoever (including claims for the negligence, gross negligence, and/or strict liability of the Volunteer in Prosecution Program), and any and all related attorney's fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become a Volunteer.

<b>Print Name (Last, First, Middle/Maiden):</b>	
<b>Date of Birth:</b>	<b>Place of Birth:</b>
<b>Social Security #:</b>	<b>List any other names or SSN# used:</b>

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Applicant Signature

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Date

\*Please include a copy of your Driver's License and submit it with your application.

<b>Please do not write in shaded area, for office use only:</b>			
<input type="checkbox"/> Interviewed	<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	Reason: _____
Assigned to: _____	Start Date: _____	End Date: _____	
Badge Given: _____	Returned: _____		
Comments: _____			
_____			