



Master Clothing Volunteer Application

Name:			
	(Last)	(First)	(Middle)
Address:			
	(Street)	(City)	(Zip)
Telephone:			
	(Primary)	(Secondary)	
E-Mail Address:			

Do you have any experience in the following:		
<input type="checkbox"/> Clothing Alteration	<input type="checkbox"/> Clothing Construction	<input type="checkbox"/> Crocheting
<input type="checkbox"/> Hand Sewing	<input type="checkbox"/> Home Décor Sewing	<input type="checkbox"/> Knitting
<input type="checkbox"/> Quilting	<input type="checkbox"/> Ribbon Embroidery	<input type="checkbox"/> Sewing
<input type="checkbox"/> Smocking	<input type="checkbox"/> Other _____	
Would you be able to conduct a class/training:		
<input type="checkbox"/> Clothing Alteration	<input type="checkbox"/> Clothing Construction	<input type="checkbox"/> Crocheting
<input type="checkbox"/> Hand Sewing	<input type="checkbox"/> Home Décor Sewing	<input type="checkbox"/> Knitting
<input type="checkbox"/> Quilting	<input type="checkbox"/> Ribbon Embroidery	<input type="checkbox"/> Sewing
<input type="checkbox"/> Smocking	<input type="checkbox"/> Other _____	

Please describe briefly your volunteer experience below

Organization	Volunteer Role(s)	From Month/Year	To Month/Year	Contact Person's Name & Number

Have you ever been convicted of a felony? Yes No
If Yes, please explain:

I understand that my enrollment as a volunteer is contingent upon successful completion of the application process. I give my permission for the above-named references to release information about me and for my criminal history to be verified.

I agree to serve as a Volunteer for Texas A&M AgriLife Extension and I understand there is no compensation.

Signature of Applicant

Date

Signature of County Agent

Date

Thank you for your willingness to share your talents with others!

Texas A&M AgriLife Extension does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or veteran status.