

## Cornerstone Community Action Agency RSVP - Volunteer Application

114 Needham Street, Coleman, Texas 76834 \* [www.ctoinc.org](http://www.ctoinc.org)

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Legal: First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Preferred Name (if different) \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

May RSVP contact you by e-mail? ☐ Yes ☐ No

Would you like to receive the CCAA RSVP newsletter through (check one) ☐ Mail ☐ Email

Please check all that apply to you: (This information is required and used for statistical purposes only.)

☐ Male ☐ Female ☐ Single ☐ Married ☐ Widowed

Racial Group: ☐ White ☐ Black or African American ☐ Asian ☐ American Indian ☐ Native Hawaiian or Pacific Island

Ethnicity: ☐ Hispanic or Latino ☐ Non-Hispanic or Non-Latino

Physical Limitations: \_\_\_\_\_

Retired Military: ☐ Yes ☐ No Veteran: ☐ Yes ☐ No Spouse of a Veteran: ☐ Yes ☐ No

*If you use your personal automobile in reporting to and from your station(s) and during service you must keep in effect automobile liability insurance in accordance with Texas state law which is certified by your signature below. All information below is REQUIRED for the RSVP supplemental insurance (personal/automobile liability and accident) to be in force while you are volunteering - this is a volunteer benefit at no cost to the volunteer:*

I have personal automobile insurance as required by the State of Texas: ☐ Yes ☐ No If yes, provide a copy of active coverage

Driver's License No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Do you use your car as transportation to and/or from your volunteer assignment? ☐ Yes ☐ No

Do you use your car during your volunteer assignment? ☐ Yes ☐ No

### Beneficiary for RSVP Insurance:

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Photo Release:** I hereby give my permission to the CCAA RSVP for the use of my name and photograph for a variety of purposes, including but not limited to, the RSVP newsletter, website and press releases.

**Confidentiality:** I hereby agree and acknowledge that all confidential information, to which I may have access as a CCAA. RSVP Volunteer, is restricted and may only be used in the performance of volunteer duties at assigned stations. I will not discuss or share any confidential, privileged or personal data outside the scope of my assignment.

**Background Check:** I hereby acknowledge that some stations may require a background check and I give my permission for these checks to be conducted.

**I, the undersigned, hereby request to be enrolled as a volunteer in the CCAA RSVP Program. I understand that my service is voluntary and I agree to serve without compensation. I certify that I am 55 years of age or older.**

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

RSVP Directors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Retired from: \_\_\_\_\_ Position: \_\_\_\_\_

Places where I am now volunteering: \_\_\_\_\_

Places where I might like to volunteer: \_\_\_\_\_

From whom or where did you hear about RSVP? \_\_\_\_\_

Do you have family members serving in the military and if so how many? \_\_\_\_\_

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**Please check activities/skills that are good match with your interests and abilities as an RSVP volunteer:**

**General Maintenance**

\_\_general handyman  
\_\_yard work

**Arts**

\_\_crafts  
\_\_sewing/crochet  
\_\_usher

**Services for Seniors**

\_\_errands/deliveries  
\_\_friendly visitation  
\_\_medical transportation  
\_\_nursing home advocate  
\_\_telephone reassurance  
\_\_benefits information  
\_\_veteran services

**I am available to volunteer:**

\_\_Monday \_\_am \_\_pm  
\_\_Tuesday \_\_am \_\_pm  
\_\_Wednesday \_\_am \_\_pm  
\_\_Thursday \_\_am \_\_pm  
\_\_Friday \_\_am \_\_pm  
\_\_Saturday \_\_am \_\_pm  
\_\_Sunday \_\_am \_\_pm

**Office/Clerical**

\_\_computer/data entry  
\_\_filing/typing  
\_\_prepare mailings  
\_\_answer phone

**Public Safety**

\_\_police services  
\_\_disaster services

**Museums/Libraries**

\_\_docent/guide  
\_\_book store/sale  
\_\_exhibit host

**Community Projects**

\_\_thrift store  
\_\_holiday events  
\_\_fundraising  
\_\_tax assistance  
\_\_special events  
\_\_military family events  
\_\_recycling

**Nutrition Projects**

\_\_sort food  
\_\_prepare food  
\_\_deliver food  
\_\_distribute food  
\_\_serve food

**Education**

\_\_adult literacy  
\_\_job readiness  
\_\_story time  
\_\_teacher/presenter  
\_\_tutor/mentor

**RSVP Special Projects**

*Special projects are volunteer opportunities that occur sporadically and consist of a variety of activities. The most often occurring projects are clerical in nature and include preparing mailings and packets, answering the telephone, etc. There are also opportunities to help in some capacity with fundraising events, serving as a host/hostess for exhibits, helping with registration for a conference or event and more. Would you like to be informed of these projects knowing that you can accept or decline based on your schedule and interests?*

☐ Yes

☐ No

Please list other special skills, interests, or languages you speak:

\_\_\_\_\_  
\_\_\_\_\_

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**RSVP Staff is required to provide data related to the questions below. If you know the answer or can give an accurate estimate please provide answers to the questions below:**

Do you serve veterans? \_\_\_\_\_ Number if known? \_\_\_\_\_ Do you serve family members of veterans? \_\_\_\_\_ Number if known? \_\_\_\_\_

If you serve active military members through your service please indicate how many: \_\_\_\_\_

If you serve military families such as a spouse or children please indicate how many: \_\_\_\_\_

If you mentor children through your volunteer service please indicate how many: \_\_\_\_\_

If you serve ex-offenders through your volunteer service please indicate how many: \_\_\_\_\_

If you serve prisoners or immigrants through your volunteer service please indicate how many: prisoners \_\_\_\_\_ immigrants \_\_\_\_\_

Completion of the CCAA RSVP volunteer application does not automatically qualify you as a volunteer in the RSVP program. The RSVP program operates under what is called RSVP Performance Measure Requirements and must maintain a certain percentage of RSVP volunteers serving in Priority Focus Areas. RSVP staff will, however work with you to ensure that you are serving in one of these areas.