



For Official Use Only	
Date Received: _____,	20 _____
Reviewed by: _____	Date: _____
Interviewed by: _____	Date: _____
Hired for position : <input type="checkbox"/> Yes <input type="checkbox"/> No (see comment section)	
Notified by: _____	Date _____

VOLUNTEER APPLICATION

Beautiful Abilities provides equal employment opportunity to all qualified persons, and does not unlawfully discriminate against any person on the basis of race, color, creed, religion, sex, national origin, age, disability, genetic information, marital or veteran status, sexual orientation, or any other legally protected status.

Please -

- Type or print all requested information.
- Complete all items on the application, even if the information is included on your resume or other document submitted by you.
- Specify the exact title of the position in which you are interested.
- If necessary, attach additional 8 ½" X 11" sheets of paper to this application.
- Sign and date your application (note: by signing you are agreeing to specific background checks).
- Submit your application

Volunteer Request

Date: _____ Position Applying For: _____

When are you available? _____

How did you hear about position: _____

Personal Information

Last Name	First Name	Middle Name
Address	City	State & Zip
How long at current address?	Date of birth:	Birthplace:
Social Security # - -	Telephone Number () -	Cell Telephone () -
Driver's License (State/No.)	Email Address	

General Information

Are you legally eligible for work in the U.S.A.?	<input type="checkbox"/> Yes <input type="checkbox"/> No (Verification may be required)
Have you ever applied to or worked for Beautiful Abilities before? If so, when?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any of your relatives currently working for Beautiful Abilities? If so, please list name and department, if applicable.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a felony? If yes, please explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No



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Education

School	Name and Location	Dates	Course of Study	Degrees
High School/GED				
College/University				
Graduate School				
Vocational/Certificate				

Military

Military Service: Yes No

Branch: _____

Specialized Training:

Employment History

Begin with most recent employment. If needed, you may add pages to continue your employment history.

May we contact your current employer? Yes No Not Applicable

Employer: _____ Address: _____ _____ Supervisor: _____ Telephone: () _____ - _____	Dates of Employment _____ to _____	Pay or salary Start: \$ _____ Final: \$ _____	Position: Duties: Reason for Leaving:
Employer: _____ Address: _____ _____ Supervisor: _____ Telephone: () _____ - _____	Dates of Employment _____ to _____	Pay or salary Start: \$ _____ Final: \$ _____	Position: Duties: Reason for Leaving:
Employer: _____ Address: _____ _____ Supervisor: _____ Telephone: () _____ - _____	Dates of Employment _____ to _____	Pay or salary Start: \$ _____ Final: \$ _____	Position: Duties: Reason for Leaving:



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Relevant Volunteer Experience and Additional Skills / Training

Name of organization: Person supervising: Contact information:	Description of services/duties performed
Name of organization: Person Supervising: Contact Information:	Description of services/duties performed
Additional skills:	Briefly describe additional skills
Related training:	List training, who trained and certification (if applicable)

Business References

Name	Company	Title	Contact Information

Personal References

Name	Contact Information

Comments

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Additional Information

(Please review "Offense list which bar employment" before submitting application)

Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of a DUI or DWI?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of assault and battery?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of theft?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of rape or any other sexual offenses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of assault with intent to commit rape?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of kidnapping?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of possession, distribution and/or trafficking of drugs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of intent to commit any of the above crimes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been subject to any court order involving sexual or physical abuse of a minor, including, but not limited to, a domestic order or protection?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Signature / Certification

I certify that the facts set forth in this application are true, complete, and correct to the best of my knowledge. I understand that any misrepresentations, falsifications, or omissions on this application can be grounds for rejection of my application or, if I am employed by this company, for my immediate termination from employment. I understand that, as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S. I authorize Beautiful Abilities to make any necessary inquiries and investigations into my education, military, or employment history. I further authorize, unless otherwise indicated on this application, the release of my information to Beautiful Abilities by any of the references, schools, services, or employers listed on this application. My signature below authorizes Beautiful Abilities to use my personal information to conduct a Criminal Background check, to search the Employee Misconduct, Nurse's Aide Registries and the state and federal Medicaid Fraud (OI) databases for any information these databases may contain that would prohibit employment.

Signature:

Date:

Submit Application

Submit your application to the **CEO/Director** either by:

E-mail	Mail	Secure Fax
phil.beautifulabilities@gmail.com	Beautiful Abilities 4202 E. 29 th St. Bryan, TX 77802	979-703-7535

Completed application can be turned into office at 4202 E. 29th St, Bryan or placed in mail slot afterhours