

**Arkansas Community Correction  
VOLUNTEER APPLICATION**

Instructions: Use this form to apply to volunteer at an Arkansas Community Correction (ACC) center or office. Background checks are required for all volunteers.

Name (as it appears on your driver license): \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Organization/Agency: \_\_\_\_\_

Gender:  Male  Female Race:  Caucasian  Black  Hispanic  Other: \_\_\_\_\_

**BACKGROUND CHECK INFORMATION:**

Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_

DOB (YYYY/MM/DD) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Must be at least 21 years old: \_\_\_\_\_

Have you ever been arrested?  Yes  No

**If you were ever convicted of a crime, please complete the following:**

<u>Year</u> <u>Convicted</u>	<u>Charges</u>	<u>Misdemeanor</u> <u>or Felony?</u>	<u>Date off</u> <u>Parole</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PROFESSIONAL OR PERSONAL REFERENCES:**

<u>Name/Job Title</u>	<u>Relationship:</u>	<u>Phone</u>
_____	_____	_____
_____	_____	_____

**EMPLOYMENT WITHIN THE LAST THREE YEARS**

<u>Employer Name and Address</u>	<u>Supervisor</u>	<u>Phone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**SCHOOL INFORMATION: (Student/Interns only)**

College: \_\_\_\_\_ Degree Program: \_\_\_\_\_

Academic Advisor: \_\_\_\_\_ Advisor's Phone: \_\_\_\_\_

Advisor's Email: \_\_\_\_\_

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