

Catholic Charities of Southeast Texas <u>APPLICANT / VOLUNTEER BACKGROUND QUESTIONNAIRE</u>

Please Print Confidential

NΑ	ME:					
	Last	First	Middle	Other	Names Used / Alias / M	aiden Last Name
ΑD	DDRESS:			City	State	 Zip
uс	DME PHONE:	WOI		•		
DΑ	ATE OF BIRTH (M/D/YR):		DRIVER	S LICENSE #:_		State
SC	OCIAL SECURITY #		;	Sex: F M	Race:	
1.	Have you at any time be not a criminal conviction detail the date, the place	arose out of the allega	ation.)	Yes	No If yes,	
2.	If yes, did any judicial pro If yes, please identify the proceeding, the docket r	e court in which the pro	oceeding was l	brought and its	s location, the partie	es to that
	3. Are you under the supervision of any federal, state, or local corrections agency as a result of any allegations of child/sexual abuse? Yes No 4. Have you ever been convicted of or pleaded guilty/no contest to a misdemeanor or felony (other than a parking violation)? Yes No If yes, please state the nature of the offense for which you were convicted or pleaded guilty/no contest, the date of the conviction or the entering of the plea, the judgment imposed, the court imposing the judgment and its location, and the docket number of the proceeding.					
5.	Please list all States tha				·	
	"I certify that the resknowledge, and I under this application, termine" authorize investigation background checks, and	erstand that falsified nation of employmen nation of all stateme	I statements of t, or removal t nts in this o	on this docu from participa locument, in	ment shall be gro ation in all volunte cluding criminal	unds for denial of er programs."
	Signature of Applicant / V	olunteer		Da	te	
ln	house use only:					
	Credit Driving	Criminal S	Signature:			Date:

Revised: 08/17/11; 02/21/2013