



Medical Arts and Research Center (MARC)
Volunteer Application

Section One: Personal Information

Name: _____

Address: _____

City, State Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Are you 18 years of age or older? Yes No

Section Two: Volunteer Experience & Availability

List any previous volunteer experience you have had.

If selected to be a MARC Volunteer, when would you be available?

Monday Tuesday Wednesday Thursday Friday

Time of Day: _____

Are you fluent in any languages other than English? Yes No

If yes, which language(s): _____

How did you hear about our volunteer program? Print Ad Website UTHSCSA employee
 Current Volunteer Other: _____



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Section Three: Criminal History Information

Have you ever been convicted for any crime other than a minor traffic violation? Yes No
If yes, what was the date(s) of the conviction and the exact offense charged: _____

What was the outcome (Fine, sentence, etc?): _____

List the court (city & state): _____

Name of parole or probation officer: _____

Have you ever been sentenced to deferred adjudication? Yes No
If yes, please provide date(s) and details: _____

Section Four: Agreement

I understand that the selection of volunteers is subject to background checks that are satisfactory to the University. I therefore authorize The University of Texas Health Science Center to conduct employment history and security background checks to determine my acceptability as a volunteer. I certify that the name on this application is my fill name as it appears on my Driver's License or State Identification Card. I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and are made in good faith. I understand that any omission of facts or false statements made herein shall be sufficient cause for removal of my name for consideration for the volunteer program.

I certify that I have read and agree with these statements.

Applicant Name (Printed) _____

Applicant Signature: _____ Today's Date: _____

Please submit your completed application to the information desk at the MARC or e-mail to MARCVolunteer@uthscsa.edu