



## Volunteer application form strictly confidential

PLEASE COMPLETE IN CAPITAL LETTERS

**thap** encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

*Thank you for your interest iour project.*

### Contact Details

Title Mr/Mrs/Miss/Ms/Dr/Rev/Other

First name

Last name

Preferred name

Male  Female

Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone (home)

Telephone (work)

Mobile

Email

\_\_\_\_\_

**In an emergency who would you like us to contact?**

Name

Relationship

Contact number

\_\_\_\_\_

**Please, we would like to know what languages you speak?**  
(e.g. English, Spanish, French, etc..)

\_\_\_\_\_

\_\_\_\_\_

## Please indicate how you may like to help thap

Let us know what areas you are interested in by ticking one or more of the boxes below and, if you are applying for a specific role, state the role title and location.

I am applying for an advertised role

Role title

Location

Events (e.g. Gallery exhibit...)

Office or Information centre

Services (e.g. Offering support/advice)

**thap** Speaker

**Please note that roles are not always available in every area.**

If you wish to help in a different way from those mentioned above, please tell us.

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## How much time can you offer us?

Short term

Open-ended

Other (please specify)

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	am	pm	eve
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Is there anything we need to know about your health?

Meeting your needs: if you require additional support or equipment, please tell us so that we can plan to meet your requirements.

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## How did you hear about volunteering with thap?

**thap** volunteer

Event

**thap** website

Senior home care facility

Media

Other (please specify)

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## References

Please provide two references from people who can comment on your experience and your suitability to volunteer with **thap**. Ideally these should be people you have worked for (either as a volunteer or as an employee) and neither should be a relative.

1 Name

-----  
Address  
-----

-----  
Email

Telephone  
-----

2 Name

-----  
Address  
-----

-----  
Email

Telephone  
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I confirm that the information given on this form is, to the best of my knowledge, accurate. I agree to abide by the rules and uphold the values and behaviours of **thap**.

I understand that my tasks with **thap** may involve issues and situations of a sensitive nature and I agree to maintain confidentiality at all times. I give my consent for **thap** to process the information given in accordance with the Data Protection Act 1998.

As a volunteer of **thap** I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that **thap**, its employees and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization.

I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.

Signature

Date  
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All information will be held by **thap** in a confidential manner.

Thank you very much for your interest in volunteering with **thap**. Please return the completed application form by email to: **Hello@TheHiddenArtProject.com**, Or by regular mail to:



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San Antonio TX 78259