



**Texas National Cemetery Foundation, Inc.
Dallas VAMC Voluntary Services at
Dallas-Fort Worth National Cemetery**

Name: _____

Address: _____

City/State/Zip: _____

Primary Phone: _____ **Cell or Secondary Phone:** _____

E-Mail Address: _____

Birthday: _____ **Sex** _____ **Last 4 SS#:** _____

VSO or other organizational affiliations: _____

Days Available:

M ___ T ___ W ___ T ___ F ___ S ___ S ___

AM Shift 8am to noon: _____

OR

PM Shift Noon to 4pm: _____

Emergency Contact Name/Relationship: _____

Phone Number/s: _____

Privacy Act Notice:

The information requested on this form is solicited under the authority of 38 U.S.C. 513 and will be used in the selection and placement of potential volunteers in the VA Voluntary Service Program. The information you supply may be disclosed outside VA as permitted by law; possible disclosures include those described in the "routine uses" identified in the VA system of records 57VA125 Voluntary Service Records-VA, published in the Federal Register in accordance with the Privacy Act of 1974. The routine uses include disclosures: in response to court subpoenas, to report apparent law violations to other Federal, State or local agencies charged with law enforcement responsibilities, to service organizations, employers and Unemployment Compensation Offices to confirm volunteer service, and to congressional offices at the request of the volunteer. Disclosure of the information is voluntary, however, failure to furnish the information will hamper our ability to arrange the most satisfactory assignment for you and the Department of Veterans Affairs. Disclosure of the Social Security number is voluntary. The number will be used in the identification or records.

Signature/Date: _____

Mail or E-Mail completed application to:

**Mrs. Mickie Prendergast
Volunteer Coordinator
1114 Fawn Ridge Drive
Duncanville, Texas 75137-3625
214-202-1902
mickie.prendergast@yahoo.com**