



**Central Counties Services  
Volunteer Application – Planning & Network Advisory Committee (PNAC)**

*Thank you for your interest in volunteering with the Central Counties Services (Center) PNAC. The following information will assist the Board of Trustees in selecting those individuals for PNAC membership who best represent the interests of the community that we serve.*

Name: (Please Print) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you or any of your family members receiving services through Central Counties Services?  
Yes \_\_\_ No \_\_\_

Have you ever been convicted of a criminal offense or been listed as revoked on the misconduct registry? Yes \_\_\_ No \_\_\_

Have you lived outside Texas in the last two years? Yes \_\_\_ No \_\_\_

How did you hear about this PNAC volunteer opportunity?

\_\_\_ PNAC member \_\_\_ Service Provider \_\_\_ Website

(Specify \_\_\_\_\_)

\_\_\_ Other (Specify) \_\_\_\_\_

What motivates you to volunteer?

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Do you speak another language other than English?

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