

VOLUNTEER APPLICATION

St. John's Lutheran Church



APPLICANT INFORMATION

Name (Last, First, Middle) _____ Date _____

Address _____ City _____ State _____ ZIP _____

Phone _____ Alternate Phone _____ Best Contact Time _____

Email _____

Date of Birth _____

Special Interests & Hobbies:

IN CASE OF EMERGENCY

Notify: _____ Phone _____

Name of Nearest Relative: _____ Phone _____

WORK EXPERIENCE FOR THE PAST 5 YEARS

1. Job Position _____ Supervisor _____

Start Date _____ End Date _____

2. Job Position _____ Supervisor _____

Start Date _____ End Date _____

3. Job Position _____ Supervisor _____

Start Date _____ End Date _____

4. Job Position _____ Supervisor _____

Start Date _____ End Date _____

5. Job Position _____ Supervisor _____

Start Date _____ End Date _____

PERSONAL REFERENCES

1. Name _____ Address _____
Relationship _____ Occupation _____ Phone _____
2. Name _____ Address _____
Relationship _____ Occupation _____ Phone _____
3. Name _____ Address _____
Relationship _____ Occupation _____ Phone _____

VOLUNTEER INFORMATION

Volunteer Position: _____

List any education, experience, certifications, or other training relevant to this volunteer position:

Why would you like to volunteer as a worker with children and/or youth?

What qualities do you have that would help you work with children and/or youth?

How were you parented as a child?

How do you discipline your own children?

Have you ever been exposed to an incident of child abuse or neglect? Yes No
If yes, how did you feel about the incident?

Would you be available for periodic volunteer training sessions? Yes No

CRIMINAL HISTORY

Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including, but not limited to, drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)? Yes No

If yes, please explain fully:

Have you ever been convicted of a criminal offense? Yes No

Are you currently on probation or parole? Yes No

If you answered "Yes" to any of the above questions, please explain the nature of the offense and provide the date of the offense and the county and state in which it occurred:

APPLICANT STATEMENT - *Read & Sign Below*

I certify that this volunteer application was completed by me and that all of the information on this application is true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts called for herein will result in my disqualification from further consideration as a volunteer. I understand that this volunteer application is not valid without my signature.

Print Name _____

Signature _____ Date _____