



Volunteer Application

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| Name: | | |
| Address: | | |
| City: | State: | Zip: |
| Home # | Work # | Cell # |

Single Married Separated Divorced Widowed

| | | |
|----------------|-----------------|----------------|
| Years Married: | Years Divorced: | Years Widowed: |
|----------------|-----------------|----------------|

Level of Education

Some High School High School Graduate Some College College Graduate Trade School Graduate School

1. Describe what it means to you to be Christian:

2. What is your understanding of how a person becomes acceptable to God?

3. What is your perception of God?

4. Describe your relationship and daily walk with God:

5. Do you have a church “home”? No Yes If yes, which church? _____

6. Describe your religious upbringing:

7. How would you describe your personal health?

8. What is your story of drug/alcohol abuse, personal pain or abuse. Include your loss, how it has affected you, your healing process, and what you learned about yourself:

9. Have you ever received counseling? Yes No

10. What is your expectation of what you will receive from this ministry?

11. What do you feel you have to offer others in this ministry?

12. How much time do you see yourself being able to devote to this ministry and in what capacity?

13. Do you see yourself as an encouraging person? Would you be able to provide kindness and graciousness in the face of animosity and resistance? Describe how you deal with conflict in relationships:

I hereby release *Safe Family Ministries*, its agents, and its representatives from any liability and responsibility that may arise in connection with my volunteer duties. I also hereby consent for *Safe Family Ministries* to use my name, likeness or program participation for public relations purposes; I understand that I will not receive compensation for any such use.

If driving is involved in my volunteer duties, I hereby acknowledge that I have a current driver's license and automobile liability insurance.

I also agree to the following requirements:

- To perform my volunteer duties to the best of my ability;
- To adhere to *Safe Family Ministries* rules and procedures, including record-keeping requirements and the confidentiality of organization and client information;
- To adhere to my volunteer commitments, or to provide adequate notice as needed so that alternate arrangements can be made;
- To at all times conduct myself as a member of the team responsible for accomplishing *Safe Family Ministries*' mission.

My consent serves as notice that the information provided on this application is true and accurate to the best of my knowledge. I understand that any *intentional* false or misleading information I provide may be grounds for dismissal from the *Safe Family Ministries* volunteer program. I also consent to a voluntary background check by *Safe Family Ministries*, including references provided on the next page of this application.

Signed _____ Date _____ SFM Witness _____

Character References For: _____ (Volunteer's name printed)

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