

VOLUNTEER APPLICATION FORM

Interfaith Outreach Services

NOTE: A background check will be conducted prior to your acceptance as a volunteer of Interfaith Ministries, Inc.

PLEASE FILL OUT COMPLETELY

Name _____ Date of Birth ____ / ____ / ____

Address _____ City _____ Zip _____

Faith Congregation (Optional) _____

Telephone _____ E-mail _____
Home Work Cell

Emergency Contact _____ Phone _____

Have you ever been convicted of a felony? No Yes If Yes, please explain. (Conviction will not necessarily disqualify applicant from volunteer service). _____

Employment, starting with current or most recent:

1. Employer _____ Position _____
Duties _____
Beg. Date _____ End. Date _____ Reason for leaving _____

2. Employer _____ Position _____
Duties _____
Beg. Date _____ End. Date _____ Reason for leaving _____

Volunteer Experience:

1. Organization _____ Duties _____
Beg. Date _____ End. Date _____ Contact _____

2. Organization _____ Duties _____
Beg. Date _____ End. Date _____ Contact _____

Please list skills, training, education, and experience that will enhance your abilities as a volunteer:

Check all volunteer positions at Interfaith Ministries that interest you: (you don't have to make a permanent choice yet!)

Intake ___ Office ___ Board of Directors ___ Rx ___ Pantry ___

Please indicate times you are available to volunteer as your 1st, 2nd, and 3rd choice in the grid below:

HOURS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
9:00 – 11:00 am					
11:00- -1:00pm			CLOSED		CLOSED
1:00 – 3:00 pm			CLOSED		CLOSED

Available to volunteer: Weekly ___ Bi-weekly ___ Monthly ___ Willing to substitute? Yes No

This information is true and accurate to the best of my knowledge. I hereby give Interfaith Outreach Services permission to verify all information as needed. I agree to complete all required training for the volunteer position. I will abide by all guidelines and procedures of Interfaith Ministries; I will respect the confidential nature of all records and personal contact with clients; and I will work cooperatively with staff and other volunteers.

Signature: _____ Date: _____