



VOLUNTEER APPLICATION FORM

APPLICANT INFORMATION

LAST NAME:		FIRST NAME:		MIDDLE INITIAL:
ADDRESS:			CITY:	ZIP CODE:
HOME PHONE:		CELL PHONE:		
DATE OF BIRTH:		SOCIAL SECURITY NUMBER:		
E-MAIL ADDRESS:		HIGHEST LEVEL OF EDUCATION COMPLETED:		
OCCUPATION:		CURRENT EMPLOYER:		
EMERGENCY CONTACT NAME:			PHONE:	

REFERENCES AND BACKGROUND CHECK

(Please provide name and phone of two personal references)

1. NAME:		RELATIONSHIP TO YOU:		
ADDRESS:		CITY:	ZIP CODE:	
2. NAME:		RELATIONSHIP TO YOU:		
ADDRESS:		CITY:	ZIP CODE:	
Have you ever been convicted of, pled guilty or no contest to an offense (including felony, misdemeanor or municipal ordinance) or are you now subject to a pending criminal charge?				
<input type="checkbox"/> *YES <input type="checkbox"/> NO				
*IF YES, PLEASE EXPLAIN:				
Note: Convictions are not an automatic bar to all participation as a volunteer. Each case is considered on its own merit.				

INFORMATION ABOUT YOUR VOLUNTEER INTERESTS

WHAT POSITION/ROLE DO YOU DESIRE TO FILL AT THE PARISH/SCHOOL:
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PLEASE LIST YOUR RELATED SKILLS OR EXPERIENCES:

WHAT LANGUAGE SKILLS COULD YOU CONTRIBUTE: (E.G., SIGN LANGUAGE, LANGUAGES YOU SPEAK OTHER THAN ENGLISH)

PLEASE LIST YOUR CURRENT OR PREVIOUS VOLUNTEER ROLES:

ACKNOWLEDGEMENT

I certify that the information provided by me above is true and complete to the best of my knowledge. I understand that if I am accepted as a volunteer, any false statements or omissions may lead to termination of my duties, and I agree that the parish/school shall not be held liable in any respect if my volunteer assignment is terminated for this reason.

If I am working with youth on a regular basis, the parish/school is authorized by me to verify the information stated above by means of criminal records checks. I agree to follow the policies of the parish/school and I pledge to join with the church in its efforts to provide a safe and secure environment for our children and youth.

I understand that I am required to attend a Safe Environment Education Session and forward a copy of attendance to the parish/school. I have downloaded the Code of Ethical Standards for Church Leaders and the Mandatory Reporting Responsibilities from the Archdiocesan website or have received a copy of them. I have read these documents, understand their applicability to my volunteer efforts for the parish/school, and I understand my responsibilities.

PRINT NAME:

VOLUNTEER SIGNATURE:

DATE:

By entering my full name, I attest that this constitutes my legal electronic signature on this form.

We appreciate your willingness to share your faith, gifts, and skills to pursue volunteer activities in our parish/school.