



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: |
|----------------------------------------------------------------|

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.