

VOLUNTEER APPLICATION & CONFIDENTIALITY FORM



Bkgrd Ck: _____ Leadership Training: _____

PERSONAL INFORMATION / / Today's Date

Name : _____
First Middle Last

Date Of Birth : _____
Month Day Year

Title Type : Ms. Mrs. Mr. Rev. Other: _____ Preferred Nickname: _____

Spouse's Name : _____

Full Address : _____

City : _____ Zip Code : _____

Home Phone : _____ Cell Phone: _____

Prefer contact via : Home Phone Cell Phone Other: _____

E-Mail : _____

EMERGENCY CONTACT

Emergency Contact #1: _____

Phone : _____ Relationship to you : _____

Emergency Contact #2: _____

Phone : _____ Relationship to you : _____

VOLUNTEER AREA OF INTEREST

Food Pantry Resale Store Transformational Ministry (mentoring, teaching, etc.)

Other: (Please list area) _____ *Volunteer Ability Start Date : _____ / _____ / _____

Available volunteer days, times, seasons : _____

CHURCH INFORMATION AND REFERENCE

Church Name : _____ Denomination: _____

Pastor or Church Leader's Name : _____

Contact Phone Number : _____

APOSTLE'S CREED

I have received and read a copy of the Apostle's Creed, and I agree with it.

Yes

No

Signature:

*FOR VOLUNTEERS INTERESTED IN WORKING IN TRANSFORMATIONAL MINISTRY ONLY:

Criminal Background Check: Because volunteers may work with children or with financial accounts of clients in our Transformational Ministry Programs, Love INC does a criminal background check for everyone involved with the programs. Information needed for the background check is your name, date of birth, and consent.

Former Names Used :

I give permission for a background check:

Full Legal Name (print clearly) :

First

Middle

Last

Signature:

Date :

/ /

VOLUNTEER CONFIDENTIALITY AGREEMENT

I agree to protect the confidentiality of all individuals who have requested or have received assistance from Love In the Name of Christ of Newaygo County. I will not discuss or disclose information regarding any client to unauthorized persons outside of the Love INC sphere of service. In addition, I will not discuss or disclose information regarding any volunteer or staff member to persons outside the Love INC sphere of service without written permission to do so.

Confidential information includes, but is not limited to:

- Names
- Birthdates
- Social Security Information
- Addresses
- Telephone Numbers
- Financial Information
- Employment Information
- Legal Information
- Medical Information

Signature:

- Prayer requests for clients, volunteers, or staff members may be shared with your Bible study group or prayer group as long as all requests are kept on a first name/general information basis and the person asking for prayer has not specified otherwise.

LOVE INC VOLUNTEERS... BRIDGING THE GAP
BETWEEN WILLING HANDS AND WOUNDED HEARTS.

