

Volunteer Application

Name (First) (Middle) (Last) Birthday

Mailing Address Apartment Number

City State Zip Code

Home Phone Number Cell Phone Number

Do you text? **Yes No** Do you regularly check emails? **Yes No**

Email Address

Emergency Contact Name Telephone Number Relationship

Church Information and Reference

Church Name Denomination

Pastor's or Church Leader's Name Phone Number

Photo/Video Release Permission (check one below)

I hereby grant Love INC permission to publish photographs/videos taken of me for editorial, advertising, and promotional purposes for use in any print or electronic media. I agree that Love INC will own the copyright to these materials.

I prefer not to have my photograph taken.

Background Check Information

When working directly with Love INC families, you will be asked to complete a background check.

Have you previously had a background check done? **Yes No**

Do you agree to have Love INC complete a background check? **Yes No**

Signature _____ Date _____

Volunteer Application

Opportunities (Please check all that apply)

Days of Availability: Mon. Tues. Wed. Thur. Fri. Sat.

Times of Availability: Morning Afternoon Evening

Office/Events

Phone-Intake volunteer Office Volunteer Food for an event Decorate for events

Services

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Carpentry/Small | <input type="checkbox"/> Snow Shoveling/Removal | <input type="checkbox"/> Moving Help: |
| <input type="checkbox"/> Construction | <input type="checkbox"/> House Cleaning | <input type="checkbox"/> Pack |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Gardening | <input type="checkbox"/> Have Truck |
| <input type="checkbox"/> Roofing | <input type="checkbox"/> Weed-eating | <input type="checkbox"/> Have Trailer |
| <input type="checkbox"/> Drywall | <input type="checkbox"/> Mowing | <input type="checkbox"/> Manpower |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Leaves | <input type="checkbox"/> Other_____ |
| <input type="checkbox"/> Heating/Cooling | <input type="checkbox"/> Tree Trimming | |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Cooking/Preparing Meals | |
| <input type="checkbox"/> Flooring | <input type="checkbox"/> Help with | |
| <input type="checkbox"/> Auto Repair/OilChange | <input type="checkbox"/> Paperwork/applications | |

Wheels of Love

Regions you are willing to drive to: _____

Valid Driver's License: **Yes No** Current Insurance: **Yes No**

(If yes, bring both to interview)

Transformational Ministries Classes

Child Care Meal Coordinator Meal Provider Transportation Group Discussion Leader

Love It Again Thrift Store

- I would like to volunteer in the thrift store (cashier, sorting, stocking)
- I would like to help clean, sort, and prep jewelry
- I would like to help in the furniture warehouse

Notes:



Volunteer Application

Describe your relationship with Jesus.

What led you to pursue volunteering at Love INC?

What is your experience in interacting with families who are struggling financially, emotionally, relationally, spiritually...?

What have been your previous experiences/positions in jobs and/or other volunteer positions?

List 3 of your greatest strengths.

List any experiences you may have had in the past that may be helpful as you walk with someone.

Background Check Authorization Form

Volunteers

Love INC recruits and selects qualified applicants to serve as volunteers. A personal profession of having received Jesus Christ as Savior and Lord is a requirement for any applicant. Such persons with authority to recruit and select volunteers follow all applicable selection and screening procedures to verify the qualifications of each volunteer applicant under consideration. Each volunteer applicant submits a written application, participates in an initial training session related to required duties, and is interviewed by the Board or its designee. Based upon the written application, the applicant's participation in the training session, and the interview, the Board or its designee makes an initial determination concerning the qualifications of the volunteer applicant to serve in one or more volunteer positions. No volunteer applicant is allowed to begin to serve until appropriate screening procedures have been completed. This may include a thorough and careful investigation of the background of each such applicant to assure reasonable fitness to perform the duties of the volunteer activity

Background Investigation Authorization

I certify that all of the statements and answers set forth on the application form are true and complete to the best of my knowledge. I understand that should any statements or answers be found to be false, or information has been omitted, such false statements or omissions will be just cause for termination of my volunteer term.

I further acknowledge that a facsimile (FAX) or photocopy of this document shall be valid and accepted with the same authority as the original.

I hereby authorize Love INC of South Wood County to conduct a comprehensive background investigation to evaluate my application to volunteer in the organization. I understand that the background investigation and information provided will be kept confidential and maintained in a secure file.

Printed Name

Volunteer Signature

Address and city, state, zipcode

Social Security Number

Date of Birth

Email Address

Phone Number

Today's Date