



VOLUNTEER APPLICATION

The Family

Thank you for your interest in volunteering for The Family. Please complete this form to provide information about your volunteer interests and gives us information as we seek to provide a safe and secure environment for our donors, volunteers and staff.

We are aware that the Body of Christ is made up of many unique people and experiences. Praise God, we are all sinners saved by His Grace! While it never is our intention to judge and condemn, we believe it is our God-given responsibility (Matthew 18:6) to provide a safe and secure environment for everyone. As such, we ask for your cooperation and assistance in completing this application form and returning to us prior to volunteering. False statements and/or answers or omissions of information contained on the application will be sufficient cause for cancellation of your volunteer status.

Name: _____
(Last) (First) (Middle)

If you have ever used other names, please provide complete name (s) and date in use:

(Names & Dates)

Address: _____
(Street)

(City) (State) (Zip Code)

Prior Addresses in the last 7 years:

Telephone: _____ E-mail: _____
(Home) (Cell)

Date of Birth ____/____/____ SS # _____ Drivers Lic. # _____

Best Way to Contact you: PHONE EMAIL MAIL OTHER _____

Check your area(s) of interest:

- _____ Computer - data entry, programming, technical support
- _____ Facility- cleaning, electrical, plumbing, yard work
- _____ Fundraising- answering phones, prayer, mailings
- _____ General Office - filing, mailings, making phone calls, typing
- _____ Kitchen - providing food at our Fundraisers
- _____ Special events- setup/tear down at events, helping with the booth, ushering, greeting, concerts, community service drives, etc

Days/Times Available:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Evening	Evening	Evening	Evening	Evening	Evening	Evening
Day & Times Vary						

LEGAL QUESTIONNAIRE:

You are advised that in connection with your application for volunteer service, The Family (Evangel Ministries Inc) may make an investigation of your background and criminal history information, which may be conducted through any federal, state or local files, including those maintained by public or private organizations, and all public records for the purpose of confirming the information contained in your application and /or obtaining information which may be material to your certification for volunteer ministry.

In regards to the safety of our donors, volunteers, staff and others, The Family requires that its employees and volunteers pursue moral and ethical lifestyles as taught in the Scriptures.

PLEASE BE ASSURED, A YES ANSWER DOES NOT AUTOMATICALLY DISQUALIFY YOU FROM VOLUNTEERING WITH THE FAMILY. THIS IS FOR YOUR PROTECTION AS WELL.

1. Have you ever been convicted of a criminal offense (felony or misdemeanor, except for minor traffic violations)? You will need to answer "yes" if you have entered into a plea agreement, including a deferred sentence or deferred judgment arrangement, in connection with a criminal charge. Yes No

If you have been convicted of such offense, please attach a statement or explanation, including nature of offense, date, court where conviction was entered and any other relevant information

2. Do you have any pending criminal charges? Yes No

If you have pending criminal charges please attach a statement or explanation, including nature of offense, date, and any other relevant information

3. Have you ever been the subject of a civil lawsuit involving sexual misconduct, sexual harassment or other immoral behavior or conduct, involving adults or children? Yes No

If yes, please explain:

4. Do you have any drug, alcohol or substance abuse problems? Yes No

If yes, please explain:

BE ASSURED THAT YOUR COMMENTS WILL BE HELD IN STRICT CONFIDENCE.

The responses I have provided in completing this application form are complete, truthful and accurate. I hereby authorize The Family & Evangel Ministries Inc (hereunto referred to as "The Family") to make inquiries concerning my background in connection with evaluating the information I have provided on this form and in the application process, including a criminal records check if deemed necessary by The Family. I hereby authorize all persons associated with me, including churches, employers, law enforcement agencies, licensing and social services agencies, to release any information contained in their files or records concerning me to The Family and its representatives.

In consideration of the receipt and evaluation of this application form by The Family, I hereby release The Family & Evangel Ministries Inc and their directors, employees, agents, representatives and any other person or organization, including record custodians, that may release information concerning me, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs or family on account of inquiries concerning my background and any disclosures of information concerning me to The Family & Evangel Ministries Inc. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS OF IT, AND I SIGN THIS RELEASE AS MY OWN FREE AND VOLUNTARY ACT.

I understand that my service with The Family shall be volunteer service. In addition, my volunteer services shall be at-will and The Family shall be entitled to terminate my services at any time, with or without cause or advance notice. I understand and agree that I am not an employee of The Family and that I have no expectation of future employment. As a volunteer, I have no entitlement to or expectation of compensation, health insurance or other employee benefits, or unemployment or worker's compensation insurance benefits.

I affirm that I will strictly comply with all policies and procedures of The Family. If at any time I find that for any reason I am unable to support the vision, policies, procedures or doctrine of this organization, I will resign my volunteer position. I understand and agree that failure by me to abide by such policies and procedures may result in my immediate dismissal, or in disciplinary action, all at the discretion of The Family.

Applicant's Signature: _____ Date: _____

Applicant's Name: *(please print)* _____

Witness' Signature: _____ Date: _____