



VOLUNTEER APPLICATION

Name: _____ Date of Birth ____/____/____

Street address: _____

City: _____ State: _____ Zip: _____ How long at current address: _____

Phone: Home (_____) _____ Cell (_____) _____ Work (_____) _____

Email: _____

1. Have you ever previously volunteered with the Agape Center? Yes No

If yes, in what ministry? _____ Dates: _____ Ministry: _____

2. What is it that interests you about volunteering at the Agape Center?

3. What would you most like to assist with at the Agape Center?

- Children’s choir S.A.Y. Yes! after-school program Women’s aerobics
- Turning Point Bible study High School Bible study High School Boys Basketball

4. Describe previous experiences you have had in similar volunteer/work opportunities.

5. What special talents or training do you have?

6. Describe your interests and hobbies?

7. Please list your volunteer experiences with other churches or organizations (use separate sheet if needed.)

Church/Organization	Duties	Dates	Contact	Phone

8. Have you made a decision to trust Jesus as your personal Savior? _____ If so, when? _____

9. Give a brief testimony about your personal walk with the Lord.

10. What church do you currently attend? _____

Address & Phone Number: _____

Are you a member? Yes No

How often do you attend services? _____ times a month

11. What other churches have you attended in the last 3 years? (Please list Name/Address/Phone)

12. Please list your employment history (use the separate sheet if necessary)

Dates of employment (Start with most recent)	Company name and address (City, State Zip)	Immediate supervisor name and phone number	Position held	Reason for leaving position
Started __/__/__ Ended __/__/__				
Started __/__/__ Ended __/__/__				
Started __/__/__ Ended __/__/__				

13. The Bible has several passages that teach holy living in all areas of personal and public life. Two verses in particular related to sexual purity are very clear:

- (Ephesians 5:3 NIV) But among you there must not be even a hint of sexual immorality, or of any kind of impurity, or of greed, because these are improper for God's holy people.
- (1 Thessalonians 4:3-8 NIV) It is God's will that you should be sanctified: that you should avoid sexual immorality; {4} that each of you should learn to control his own body in a way that is holy and honorable, {5} not in passionate lust like the heathen, who do not know God; {6} and that in this matter no one should wrong his brother or take advantage of him. The Lord will punish men for all such sins, as we have already told you and warned you. {7} For God did not call us to be impure, but to live a holy life. {8} Therefore, he who rejects this instruction does not reject man but God, who gives you his Holy Spirit.

Can you honestly testify that your personal purity is in line with the instruction from these verses? Why or why not?

14. Do you have any health concerns that might interfere with volunteering at the Agape Center?

Yes No If yes, please explain.

References

15. Please provide the information for three people who have known you for a minimum of 2 years. The Agape Center staff will mail these individuals a reference form (and/or call them for an interview). Your application for volunteering at the Agape Center cannot be processed without the completion of these three reference forms, so please make sure the contact information that you provide is accurate.

A. **(Personal / Church Reference)** Name _____

How long have you known this person? _____

Address: _____

City _____ State _____ Zip _____

Daytime Phone _____

Email (if available) _____

B. **(Professional / Civic Reference)** Name _____

How long have you known this person? _____

Address: _____

City _____ State _____ Zip _____

Daytime Phone _____

Email (if available) _____

C. **(Family Member Reference)** Name _____

How long have you known this person? _____

Address: _____

City _____ State _____ Zip _____

Daytime Phone _____

Email (if available) _____

Applicant Signature: _____ **Date:** ____/____/____

Supplement for Positions in Children's and Youth Ministry

1. What is it about working with children or youth that interests you? _____

2. Describe a time that you have had to deal with a child or youth having behavior problems. How did you handle the situation? _____

3. Describe types of children or situations involving children you would not feel comfortable having in your group. _____

4. Describe your philosophy for how best to minister to children and youth. _____

5. You are leading a group activity which requires participants to hold hands. One of the youth in your group says that he does not like to hold hands and refuses to participate. How would you respond? _____

6. Is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, or care of children or youth? Yes No

If yes, please explain. _____

Applicant Signature: _____

Date: ___/___/___

The Agape Center appreciates your willingness to share your gifts and talents. Sharing these gifts with each other is a testament to Christ's love for us. Providing safe and secure programs for all the members of the Agape Center glorifies Christ and guides others to Him. The information gathered in this application is designed to help us provide the highest quality programming for our members, youth, and volunteers. Please initial each of the statements below.

- I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application, or dismissal from my ministry involvement.
- I understand that my references will be contacted and that a criminal background check will be conducted. I authorize investigations of all statements contained in the application.
- I understand that I must be interviewed and recommended by a staff of the Agape Center before I begin my ministry.
- I agree to observe all of the Agape Center's guidelines and policies for the program in which I am applying. I am willing to be trained, supervised, and reviewed by the Ministry Director. I understand that I will be considered as important as a staff member, and will be expected to assume responsibilities as directed by the Ministry Director, including attendance of training sessions when needed. I accept this as a commitment to Christ and His church.
- I understand that I can withdraw from the application process at any time.
- I understand that the Agape Center has a *ZERO TOLERANCE FOR ABUSE* and takes all allegations of abuse seriously. I further understand that the Agape Community Center cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of clients is grounds for immediate dismissal and possible criminal charges.
- I understand and agree that false statements and/or omissions regarding past conduct and/or present situation may be grounds for denial of the application to provide volunteer services and that refusal to inform the Agape Center of the contents of a sealed criminal record will result in the automatic denial of the application.
- My signature indicates that I have read and understand the above.

Applicant Signature: _____ **Date:** ____/____/____

I have reviewed this application and have noted any missing information.

Screening Committee Member Signature: _____ **Date:** ____/____/____