



VOLUNTEER APPLICATION

PERSONAL:

Name _____

Date of Birth & Current Age _____

Social Security # _____

Driver's License & State _____

Spouse's Name _____

Home Address/City/State/Zip _____

Home Phone # _____

Business Phone # _____

Cell Phone # _____

Marital Status: ___ Single ___ Married ___ Widowed ___ Divorced

Children's Names and Ages:

EDUCATION:

Circle last year completed:

High School 9 10 11 12

College 1 2 3 4

Degree & Major _____

Graduate School 1 2 3 4 5

Degree & Field _____

HEALTH RECORD:

Condition of Health: _____

Physical Limitations: _____

Describe any serious illnesses or operations you have had: _____

CURRENT EMPLOYMENT INFORMATION:

Company Name _____

Address/City/State/Zip _____

Immediate Supervisor _____

CHRISTIAN COMMITMENT:

Are you a Christian? _____

Please define your view of Christianity: _____

If you were to die and stand before God at the gates of heaven and were asked why you should be allowed to enter, what would you say? _____

Describe your devotional time: _____

Do you feel comfortable sharing your faith with others? _____

What church do you attend? _____
Address/City/State/Zip _____

Pastor's Name _____
Phone # _____

May we call your Pastor for a reference? _____

List positions held or services performed in church: _____

GENERAL INFORMATION:

Describe your personality: _____

What kind of person do you work well with? _____

What kind of person easily irritates you? _____

Have you had experience in dealing with young people in crisis? _____
Explain: _____

Have you ever known an unwed mother? _____

How do you feel about adoption as an alternative for a woman in a crisis pregnancy? _____

How do you feel about an unwed mother parenting her baby? _____

Do you have any prejudice in dealing with minorities? _____

If yes, please explain: _____

Please list two personal references we may contact other than your pastor or relatives:

1. Name _____
Phone # _____
2. Name _____
Phone # _____

PERSONAL INTERESTS:

What are your present hobbies? _____

What special interests do you have? _____

INVOLVEMENT:

Circle the following areas of service that you are interested in:

TEACHERS	ENCOURAGERS	SERVANTS
Childbirth	Housesitter	House Cleaning
Prenatal Care/Nutrition	Big Sister	Office Help
Parenting	Aftercare Family	Flowers/Yard Maintenance
Adoption	Family Encourager	Home Maintenance /Repair
Financial Planning	Domestic Leader	Carpentry
Bible Study	Baking	Painting
Aerobics	Cooking	Plumbing
	Arts/Crafts	Electrical
	Decorating	

CHURCH AMBASSADORS:

____ I am interested in my class/small group becoming involved with Safe Haven.

When would you be available to begin as a volunteer? _____

What times during the week are you typically available to volunteer? _____

