

SLIM (Saving Lives In Ministry) Volunteer Application

Today's Date: _____

Name: _____

Current Full Address: _____

Telephone Number: _____

E-mail Address: _____

Employer/School's Name (organization): _____

Are you at least 18 years of age? Yes _____ No _____

How did you hear about SLIM?

Have you ever been convicted (found guilty) of a crime (including probations before judgment), or are there any pending criminal charges awaiting a hearing in a court of law? Do not list any criminal charges for which records have been expunged.

Yes _____ No _____

If you answered YES, please describe all convictions, when they occurred, the facts and circumstances involved and information pertaining to if there was any rehabilitation.

Volunteer Experiences:

Placement Preference 1st, 2nd, 3rd and so on:

_____ Kitchen

_____ Eating Area

_____ Clothing Pantry

_____ Children's Area (yearly background checks required)

_____ Greeters

_____ Other

References:

List two people other than relatives who would be willing to serve as personal references.

1. Name _____

Telephone Number _____

E-mail Address _____

2. Name _____

Telephone Number _____

E-mail Address _____

Emergency Contact:

In the event of an emergency, please list the person you would want notified.

Name _____

(Relationship to you)

Telephone Number _____

Statement of Understanding: I certify that all information is true and has been given voluntarily. I understand that this information may be disclosed to any party with legal and proper interest. I release the agency from any liability whatsoever for supplying such information. I understand that I must be at least 18 years of age to volunteer at SLIM. If I am under the age of 18 and/or attending high school I will need parental consent. Upon being offered a volunteer position, I understand that I may be required to provide additional information pertinent to the position for which applied.

Applicants Signature: _____

Date: _____

Parental Signature: _____

Date: _____