



VOLUNTEER APPLICATION

Name:				Date:				
Volunteer Position of Interest:								
Street Address:								
City:			State:		Zip:			
Phone:			Email:					
Are you at least 18 years old?						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have a valid driver license? (This question applies only to volunteer positions which require driving.)						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Have you been convicted of any criminal offense other than traffic violations within the past seven years?						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you presently charged with any violations of the law other than traffic violations?						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Have you been released from confinement following a conviction for any criminal offense within the past seven years?						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p>If your response to any of the three preceding questions was "Yes", give the date, place and nature of each such conviction(s) or pending charge. (The existence of a conviction or pending charge will not necessarily preclude you from volunteering; the nature of the crime and its relationship to the volunteer position, the degree of rehabilitation that has occurred and the time elapsed since the crime or release from confinement will be considered.)</p>								
Date:			Place:			Conviction or Pending Charge:		
Days Available:		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun
Best Time of Day:		<input type="checkbox"/> Morning		<input type="checkbox"/> Afternoon		<input type="checkbox"/> Evening		
Have you ever been employed by Global Teen Challenge? If yes, give position and dates worked:						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have any relatives employed by Global Teen Challenge?						<input type="checkbox"/> Yes	<input type="checkbox"/> No	

How were you referred to us?

If referred by a Global Teen Challenge employee, who?

Have you ever been discharged from a job or forced or asked to resign? If yes, please explain:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Please list any special skills:

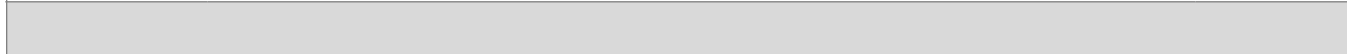
Professional licenses and/or certifications:

Specific ministry experience that would directly relate to the volunteer position that you are applying for:

When did you become a Christian?

Church Affiliation:

Pastor's Name:

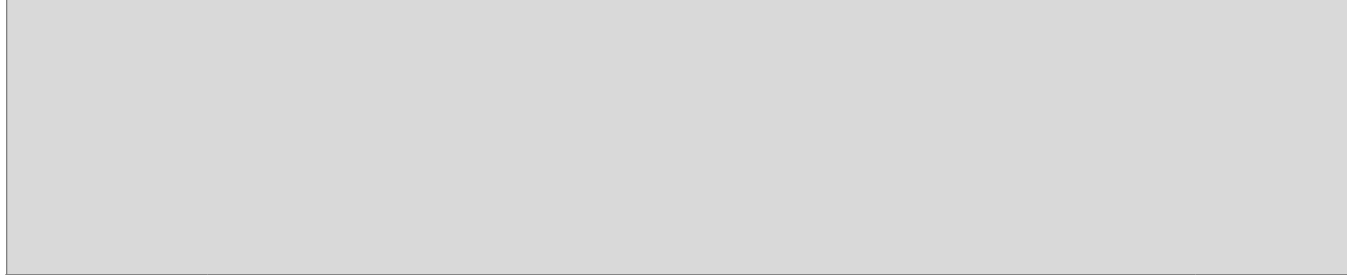


- Requirements of a Volunteer:**
- Regularly attend an evangelical church
 - Do not use any alcohol, tobacco or drugs
 - Conduct your sexual behavior according to Scripture
 - Submit a letter of recommendation from your pastor



Please list three character references who have known you for at least two years:

Name	Address	Phone
1.		
2.		
3.		



This application will be held in confidence and shared only with those responsible for making decisions regarding your position.

READ BEFORE SIGNING:

I understand that Global Teen Challenge reserves the right to inspect all bags (including purses and briefcases) or parcels brought onto or taken off of Global Teen Challenge property. I understand that refusal to submit to searches when requested to do so may result in dismissal of my volunteer position.

I understand that Global Teen Challenge is not only a non-profit organization, but a ministry, and that all volunteers must meet the requirements listed above.

By signing below, I release Global Teen Challenge from any and all liability regarding myself while I am associated with Global Teen Challenge.

Volunteer's Signature:

Date:

FOR CORPORATE OFFICE USE

Interviewed By:

Date:

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> Status:
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Comments: