



Volunteer Application Form

This form is to be completed, signed and returned to the Volunteer Coordinator at the parish or school at which you wish to provide volunteer services. A copy of this completed form will be kept on file.

Volunteer Information:

Name: _____ Date: _____

Address: _____
Street City State Zip

Home Phone _____ Cell Phone _____

1. Are you 18 years of age or older? Yes No
2. I am interested in volunteering at: School Parish
3. I am interested in volunteering for: School Activities Religious Education
 Youth Ministry Other _____
4. I am available: Mornings Days Evenings Weekends
5. Date(s) available: _____
6. Have you ever been convicted of a criminal offense? Yes No
7. Have you ever volunteered before? Yes No If yes, what organization(s)?

References:

Please provide two personal/professional references. If you have resided in this area for less than two years, please provide at least one reference from your previous area of residence.

Name _____

City _____ State _____ Phone _____

Relationship _____ Years Known _____

Name _____

City _____ State _____ Phone _____

Relationship _____ Years Known _____



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IMPORTANT- Please read and sign below

The information on this form is true and complete. If accepted as a volunteer, any misstatement or omission of fact on this form may result in suspension of my services. I grant permission to check my background and references and release the Diocese and all diocesan locations from any and all liability that may result.

I further understand that all persons who will have contact with children or vulnerable adults are required to comply with Diocesan Safe Environment policies and procedures and are required to undergo a state and federal criminal background check.

Print Name

Signature

Date

Parent or Guardian (if under 18)

Date