



Volunteer Application

APPLICANT INFORMATION:

NAME:	DATE:
STREET ADDRESS:	CITY, ST, ZIP:
PHONE:	EMAIL:

NEWSLETTERS: I ALREADY RECEIVE NEWSLETTERS YES, ADD ME TO THE LIST

DEMOGRAPHIC INFORMATION:

You may optionally provide this information. The following is used to understand the demographic makeup of our volunteers.

DATE OF BIRTH:	GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
HIGHEST DEGREE EARNED:	DEGREE:
NAME OF COLLEGE:	YEAR GRADUATED:
MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED	
EMERGENCY CONTACT:	PHONE:
Do you attend a church? YES / NO	WHERE:

PREVIOUS EXPERIENCE:

DATES:	ORGANIZATION/PP:	POSITION:	SPECIAL SKILLS & QUALIFICATIONS:

AVAILABILITY:

WHICH DAYS OF THE WEEK ARE BEST FOR YOU: (check all that apply) <input type="checkbox"/> SUNDAY <input type="checkbox"/> MONDAY <input type="checkbox"/> TUESDAY <input type="checkbox"/> WEDNESDAY <input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY <input type="checkbox"/> SATURDAY	
WHAT TIMES ARE YOU AVAILABLE: (check all that apply) <input type="checkbox"/> MORNINGS <input type="checkbox"/> AFTERNOONS <input type="checkbox"/> EVENINGS	HOW MANY HOURS/PER WEEK ARE YOU AVAILABLE:

*Road to Hope considers qualified applicants regardless of race, color, gender, national and ethnic origin, age, marital or veteran status.



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VOLUNTEER OPPORTUNITIES:

Tell us in which areas you are interested in volunteering (see website for job descriptions)

DIRECT SERVICE OPPORTUNITIES

INDIRECT ADMINISTRATIVE OPPORTUNITIES

- DOULA
- MENTORING
- RELIEF VOLUNTEER (ON-CALL)
- LIFE SKILLS INSTRUCTOR
- TRANSPORTATION TEAM
- TUTORING
- BIBLE STUDY LEADER
- HOLIDAY CELEBRATIONS PLANNER
- CULTURAL OUTINGS COORDINATOR
- BABY SHOWER/GENDER REVEAL PARTY PLANNER
- OTHER
- EVENTS COMMITTEE
- FUNDRAISING/DIRECT MAILINGS
- MARKETING/PUBLIC RELATIONS
- GRANT WRITING
- PROFESSIONAL NETWORKING/PUBLIC SPEAKING
- MICRO EVENTS HOST
- CHURCH LIAISON
- HOUSE MAINTENANCE
- TECHNOLOGY ADVISOR
- SUPPLY DRIVE COORDINATOR (DIAPERS, BABY CLOTHES, HOUSEHOLD ITEMS, ETC.)
- OTHER

IF "OTHER," PLEASE TELL US HOW:	
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Why do you want to volunteer with us? _____

What drew you to our ministry? How did you hear about us? _____

It is the mission of Road2Hope to be a Christ-centered community. How do you see yourself furthering this mission? _____

AGREEMENT & SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

SIGNATURE: _____ DATE: _____

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