

Social Security # \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name: \_\_\_\_\_

Nickname: \_\_\_\_\_

Male  Female Date of Birth \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone Numbers  
 Home (\_\_\_\_) \_\_\_\_\_  
 Work (\_\_\_\_) \_\_\_\_\_  
 Cell (\_\_\_\_) \_\_\_\_\_

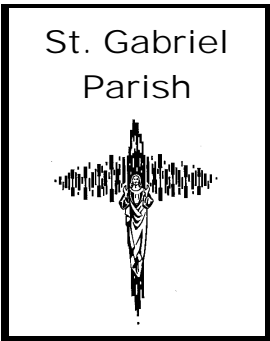
E-Mail Address \_\_\_\_\_

Current Employer:  
 \_\_\_\_\_

Occupation:  
 \_\_\_\_\_

**Emergency Contact Information:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_\_  
 Relationship to Volunteer \_\_\_\_\_



Application  
for a  
Volunteer  
Position

Date Filed \_\_\_\_\_

Position applied for:  
 \_\_\_\_\_

Have you ever been convicted of any law violation (except for minor traffic violations)?  
 Yes  No

If yes explain:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you been a resident of Ohio for 5 years?  
 Yes  No

**Parish Data**

Parishioner  Yes  No

Date Registered \_\_\_\_\_

**Church History and Prior Volunteer Experience**

List all previous church work (list each church's name and address, type of work performed, and length of involvement)

\_\_\_\_\_

\_\_\_\_\_

List any other previous volunteer experience (list each organization's name and address, type of work performed, and dates)

\_\_\_\_\_

\_\_\_\_\_

List any gifts, callings, training, education, or other factors that have prepared you for the volunteer position you are seeking:

\_\_\_\_\_

Please indicate the date you would be available to begin \_\_\_\_\_

What is the minimum length of commitment you can make? \_\_\_\_\_

List three personal references who are not relatives or former employers.

	Name	Address, City, State, Zip	Phone
1.			
2.			
3.			

**“PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

- I certify that all information provided in this volunteer application is true and complete. I understand that any false information or omission may disqualify me from further consideration and may result in my dismissal if discovered at a later date.
- I understand that St. Gabriel Church may request an investigative consumer report from a consumer reporting agency and I consent to such, including but not limited to a criminal background check. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer-reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.
- I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a decision. I release such persons and organizations from any legal liability in making such statements.
- I will subscribe to and actively promote the Mission and Principles of St. Gabriel Church.
- I have read, understand, and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_