

**SACRAMENTO VALLEY TEEN CHALLENGE
VOLUNTEER APPLICATION
(Confidential)**

Name: _____ Date: _____

Business Telephone: _____ Home Telephone: _____

Cell: _____ Email: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____ (year optional)

Are you 18 years of age or older? Yes / No

Address: _____
Number & Street

City

State

Zip

How did you learn about Teen Challenge? _____

Why are you interested in volunteering at Teen Challenge? _____

What days and hours are you available to work? _____

What types of volunteer work are you interested in (check all that apply):

- | | | |
|-------------------|----------------------------|-------------------------|
| _____ Office | _____ Enterprise support | _____ Internship |
| _____ Mentoring | (i.e. Thrift Store) | _____ Technical support |
| _____ Teaching | _____ Prayer | _____ Events |
| _____ Fundraising | _____ Virtual Volunteering | _____ Women's Auxiliary |
| _____ Maintenance | _____ Advisor | _____ Other: _____ |

Do you speak, read or write another language? Yes / No

Language: _____ Speak Read Write

Have you sought treatment for, or been arrested for any offense involving alcohol or illegal drug use in the last two years? Yes / No (Answering yes will not necessarily exclude you from consideration.)

If yes, please explain: _____

Are you able to refrain from tobacco use during volunteer hours? Yes / No (SVTC strictly prohibits all tobacco use during working hours, and at anytime within sight of SVTC property.)

Have you ever been convicted of or pled no contest to a crime other than a minor traffic violation, or are you now under charges for any criminal offense? Yes / No (A criminal conviction will not necessarily disqualify you from volunteering.) If yes, please give a full explanation. _____

If you work at a SVTC property where children live, do you understand that your background check will include fingerprinting and that you will be responsible for the cost of the fingerprinting? Yes / No

DRIVING INFORMATION (Complete if you will drive as a part of your volunteer work.)

Do you have a valid driver's license? Yes / No

License # _____ State _____ Expiration Date _____ Class _____

Name of personal auto insurance company: _____

Have you had any vehicle accidents or been convicted of any moving violations in the last 5 years?

Explain: _____

RELIGIOUS TRAINING & EXPERIENCE

Please explain how you became a Christian: _____

How long have you been a Christian? _____ Have you ever backslid as a Christian? Yes / No

If yes, please explain what happened. _____

Are you in harmony with the tenets of faith of Sacramento Valley Teen Challenge? Yes / No

If no, where do you differ? _____

Name of the church you attend: _____ How long have you attended? _____

Are you an active member in good standing? Yes / No Pastor's Name: _____

How much time do you spend in prayer and in reading the Word daily? _____

RELEVANT TRAINING AND EXPERIENCE:

List any volunteer or work experience (previous or current) you have had that will relate to the volunteer position you are seeking:

Organization: _____ Dates: _____ Is this? Volunteer / Work

Responsibilities: _____

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Responsibilities: _____

Please list any special training, licenses or certificates: _____

DISCOVERING ABILITIES, SKILLS AND PASSIONS

Answer the following questions, while thinking of any area of your life that’s currently exciting for you or energizes you.

1. Some things you believe you do well are: _____

2. Some things you think you are not very good at are: _____

3. If given the chance, you think you might be good at: _____

4. One new thing you’ve tried recently that went well was: _____

5. Who encouraged you to do what you listed in #4? _____

What made the person or persons think you could do it? _____

Would you be interested in taking a spiritual gifting test? Yes / No

REFERENCES:

Besides your Pastoral reference, list two persons not related to you who have knowledge of your work and/or ministry performance within the last three years.

1. Pastor's Name: _____ Tel. No.: (____) _____
Church Name: _____ City: _____
Number of years attended _____ Is it all right for us to contact your Pastor? ____ Yes ____ No

2. Name _____
Telephone No.: (____) _____
Relationship _____
Number of years acquainted _____

3. Name _____
Telephone No.: (____) _____
Relationship _____
Number of years acquainted _____

VOLUNTEER'S STATEMENT (Read Carefully)

In consideration of the receipt and evaluation of this application by Sacramento Valley Teen Challenge, I agree and represent that:

- The information contained in this application is correct to the best of my knowledge. I understand that any false, incomplete or incorrect statements may result in my disqualification from consideration as a volunteer.
- I authorize any references, or any other person or organization, whether or not identified in this application, to give you information (including opinions) regarding my character and fitness for volunteer service. I hereby release any individual, church, denominational custodians, both collectively and individually, and whether or not identified in this application, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization, excepting only the communication of knowingly false information. I further state that **I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** This is a legally binding release, which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of this authorization shall be as valid as the original. I further understand that a criminal records check may be conducted on me, and I consent to any such check.
- Check one of the following two options:
 I waive I do not waive
any right that I may have to inspect any information provided about me by any person or organization described above.
- I agree to abide by the Volunteer Guidelines while serving as a volunteer at Sacramento Valley Teen Challenge. I understand that a substantial percentage of participants in the Sacramento Valley Teen Challenge program have criminal backgrounds and that I assume all related risks in providing services to these individuals. I hereby release and discharge Sacramento Valley Teen Challenge from liability with regard to any damages, losses or injuries sustained by me arising out of, or relating to my volunteering with Sacramento Valley Teen Challenge.
- I also understand that I am freely entering into this volunteer arrangement and that I will receive no pay or benefits such as medical insurance or worker's compensation insurance in exchange for my volunteering.

I have read, understand, and agree to the information and terms above.

Signature

Date

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