



## VOLUNTEER APPLICATION

Name: \_\_\_\_\_ Social Security \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Driver License: State \_\_\_\_ Number \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ How long at current address: \_\_\_\_\_

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

Email: \_\_\_\_\_

Other names by which you have been known (maiden, previous marriage, etc.): \_\_\_\_\_

Other states you have lived in: \_\_\_\_\_

1. Have you ever previously volunteered with The Bridge? o Yes o No

If so, in what ministry? Dates: \_\_\_\_\_ Ministry: \_\_\_\_\_

2. What is it that interests you about serving at The Bridge?

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3. Describe previous experiences you have had in similar volunteer/work opportunities.

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4. What would you most like to assist with at The Bridge?

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5. What special talents or training do you have?

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6. Describe your interests and hobbies?

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Name of Applicant: \_\_\_\_\_

7. Please list your volunteer experiences with other churches or organizations (use the back of this page or a separate sheet if needed.)

8. Place a check by the following words that describe you.

<input type="checkbox"/> Team Player	<input type="checkbox"/> Thorough	<input type="checkbox"/> Leader	<input type="checkbox"/> Teachable
<input type="checkbox"/> Reliable	<input type="checkbox"/> Honest	<input type="checkbox"/> Compassionate	<input type="checkbox"/> Balanced
<input type="checkbox"/> Humble	<input type="checkbox"/> Flexible	<input type="checkbox"/> Servant	<input type="checkbox"/> Intelligent
<input type="checkbox"/> Sensitive	<input type="checkbox"/> Patient	<input type="checkbox"/> Even Tempered	<input type="checkbox"/> Self Starter
<input type="checkbox"/> Spiritual	<input type="checkbox"/> Energetic	<input type="checkbox"/> Laid Back	<input type="checkbox"/> Committed
<input type="checkbox"/> Risk Taker	<input type="checkbox"/> Faithful	<input type="checkbox"/> Friendly	<input type="checkbox"/> Strong Willed

9. Have you received Jesus Christ as Lord and Savior?  yes  no

If yes, when and how did you become a Christian? What changes have you seen in your life? \_\_\_\_\_  
\_\_\_\_\_

10. What church do you currently attend? \_\_\_\_\_

11. How often do you attend services? less than once 1 2 3 4 5 6 7 or more times a month.

12. Have you at any time been accused, rightly or wrongly, of child abuse, sexual molestation, or neglect?  yes  no  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

13. Have you been arrested or convicted for anything more serious than a traffic violation?  yes  no  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

14. Have you ever been treated for any nervous or mental illness?  yes  no  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

15. Have you ever gone through any treatment for drug or alcohol abuse?  yes  no  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

16. Are you currently using any illegal drugs?  yes  no

17. Is there any other information you would like to share that may affect your ability to fulfill this ministry?: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES**

**PLEASE PRINT**

List persons not related to you whom you have known for 3 years, one of whom is a leader (pastor, elder, or small group leader) at your church and one from work. High school volunteers please provide two school staff.

1. \_\_\_\_\_

Name	Address	City	State	Zip	Home Phone: _____
Relationship: _____					Cell Phone: _____
					Email: _____

2. \_\_\_\_\_

Name	Address	City	State	Zip	Home Phone: _____
Relationship: _____					Cell Phone: _____
					Email: _____

3. \_\_\_\_\_

Name	Address	City	State	Zip	Home Phone: _____
Relationship: _____					Cell Phone: _____
					Email: _____

4. \_\_\_\_\_

Name	Address	City	State	Zip	Home Phone: _____
Relationship: _____					Cell Phone: _____
					Email: _____

**Please sign below if you agree with the following:** "I am willing to be trained, supervised, and reviewed by the staff of The Bridge. I accept this as a commitment to Christ and His church. I give authorization to The Bridge or its representatives to verify the information on this form. I verify that the information on this volunteer application is true."

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent/guardian (if a minor): \_\_\_\_\_ Date: \_\_\_\_\_

I understand that a Kansas Bureau of Investigation and/or Police Department and/or other criminal background checks, a child abuse registry check, a motor vehicle check, court diversion check, and sex offender check will be made of my background and that all information about me will be kept confidential by The Bridge of Topeka, Inc. My consent to which is hereby given, which consent shall be a continuing consent to periodic record checks for as long as I am a volunteer at The Bridge.

I understand that my service as a volunteer is voluntary and consensual and that I serve at my own risk. I understand that The Bridge of Topeka, Inc. assumes no liability for my well being and does not provide insurance coverage for injuries I sustain during my service as a volunteer. I understand that I am responsible for providing my own insurance, including but not limited to personal liability and automobile insurance and health and accident insurance.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent/guardian (if a minor): \_\_\_\_\_ Date: \_\_\_\_\_