

Social Security # _____ / _____ / _____

Last Name _____

First Name _____

Middle Name _____

Nick Name _____

Male Female Date of Birth _____

Current Address _____

City _____ State _____ Zip _____

Home Phone () _____

Work Phone () _____

Cell Phone () _____

E-Mail Address _____

Current Employer: _____

Occupation: _____

Emergency Contact Information:

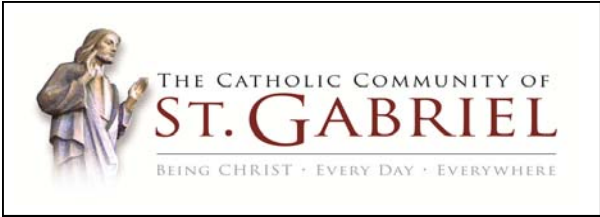
Name: _____

Address: _____

City: _____

Phone: () _____

Relationship to Volunteer: _____



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 or 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.

1. Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
E-Mail Address: _____
2. Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
E-Mail Address: _____
3. Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
E-Mail Address: _____

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: _____