

KHCB Volunteer Application Form

Thank you for your interest in volunteering for KHCB. Volunteers play an important role in the operations of this Christian Ministry. All volunteer applications are reviewed in consideration of current volunteer opportunities. Filling out an application does not in any way imply acceptance of the candidate.

Please Print:

Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Email Address: _____ Date of Birth (Optional) _____

Name of person to contact in case of emergency:

Name: _____

Relationship: _____

Telephone Numbers: Day: _____ Evening: _____

Special health issues/needs: _____

Church you attend: _____

How long have you been there: _____

Church phone number: _____

Pastor's name _____

Information about your education/experience:

I have completed: _____ High School (year) _____ Some College _____ College (year)

Community affiliations (clubs, service organizations, etc.) _____

Previous volunteer experience: _____

Special Certifications (i.e. CPR, Medical, etc.): _____

Information about your employment:

Current (or previous) Occupation: _____

Job you perform there: _____

Supervisor's contact information: _____

Have you ever been convicted or pled guilty of a crime? If yes, please explain:

Are you currently under investigation or have been charged with a crime? If yes, please explain:

Information about your volunteer interests:

Please describe in detail why you are interested in volunteering at KHCB and in what area of service you would like to help:

I can help in the following areas:

- | | |
|---|---|
| <input type="checkbox"/> Mailings | <input type="checkbox"/> Answer or make phone calls |
| <input type="checkbox"/> Assist at special events | <input type="checkbox"/> Make copies |
| <input type="checkbox"/> Filing | <input type="checkbox"/> Computer Work |

I have training/experience in:

- | | | |
|---|---|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Graphics/Design |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Public Relations | <input type="checkbox"/> Broadcasting |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Writing | <input type="checkbox"/> Filing |
| <input type="checkbox"/> Copy Machines | <input type="checkbox"/> Postage Machines | <input type="checkbox"/> Telephone |
| <input type="checkbox"/> Computer/Excel | <input type="checkbox"/> Computer/Word | <input type="checkbox"/> Computer/Other |

Is there any additional information you would like to bring to our attention?

Signature: _____

Date: _____

References: _____

I hereby certify that the information I have provided on this application is true and complete. I authorize KHCB to verify the information I have provided on this application by contacting the references, churches, and employers I have listed, by conducting a criminal records check, or by other means, including contacting others whom I have not listed. I authorize the references and employers listed in this application to give the church whatever information they may have regarding my character and fitness for the volunteer position for which I have applied. Furthermore, I waive any rights I may have to confidentiality.

In consideration of the receipt and evaluation of this application by KHCB, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of compliance or any attempts to comply, with this authorization. Should my application be accepted, I agree to abide by and be bound by the policies and the moral and spiritual teachings of KHCB and to refrain from unscriptural conduct in the performance of my duties on behalf of the church and its ministries.

I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion. I understand that any omission from or misinformation in the application may result in the rejection of my application or my dismissal from service if I have already been given my position.

Signature of Applicant

Date

Witness

Date