

# Volunteer Application Form

\*For applicants age 15 and younger  
Information received is held in strictest confidence

## SECTION A: Personal Information

Name \_\_\_\_\_ Male  Female  Grade \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Phone \_\_\_\_\_

Your Email \_\_\_\_\_ Your Cell \_\_\_\_\_

Parent Email \_\_\_\_\_ Parent Cell \_\_\_\_\_

\_\_\_\_\_

Name of Parents \_\_\_\_\_

Are your parents supportive of your ministry involvement?  Yes  No

If no, please explain \_\_\_\_\_

Do you regularly attend CDAC (2 or more times a month)? \_\_\_\_\_

Have you received Christ as your Savior? \_\_\_\_\_ When? (age) \_\_\_\_\_

Have you been baptized? \_\_\_\_\_ When? (age) \_\_\_\_\_

In a brief paragraph, please describe what your faith means to you. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SECTION B: Volunteer Questionnaire

Area of Ministry Program Interest	Staff Name (Office Use Only)

Have you completed Plan to Protect?  Yes  No

List any previous volunteer experience, hobbies, Interests or skills \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe why you would like to be part of a Ministry Team. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What strengths or assets would you bring to a Ministry Program? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any concerns about working in your desired area of Ministry? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you see yourself as a team player? \_\_\_\_\_ How? \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_ **Date:** \_\_\_\_\_

For Office Use Only				
Date Rec'd _____	Rec'd by (initials) _____	Realm _____	Min Staff _____	Follow Up _____