

VOLUNTEER APPLICATION

The Diocese of Colorado Springs/Parishes/Schools

Parish or School: _____

This application is being used to help select suitable individuals for volunteer ministry and to ensure a safe and secure environment for the children and youth who participate in our programs and use our facilities.

PLEASE PRINT

PERSONAL INFORMATION

Circle One:

Mr. Rev. Mrs.

Ms. Sr. Date _____

Name _____
Last First Middle Initial

Residence address _____
Street City State Zip Code

Home Phone _____ Work Phone _____ Fax _____

E-Mail Address _____ Previously employed/volunteered with any diocese/parish? NO YES

If yes, when? _____ If yes, where? _____

Home Parish _____ How long have you been a member of your home parish? _____

Marital Status _____

Date of Birth (if under 21): _____

Number of children, names, ages, and genders: _____

What volunteer activity are you interested in? _____

What skills and abilities do you have that make you suitable for this position? _____

EMPLOYMENT HISTORY FOR PAST 5 YEARS

1. Employed From _____ To _____
Company Name _____ Supervisor's Name & Phone Number _____
Street Address _____
City & State _____
Work Performed _____ Involving minors? Y N
Reason for leaving _____
2. Employed From _____ To _____
Company Name _____ Supervisor's Name & Phone Number _____
Street Address _____
City & State _____
Work Performed _____ Involving minors? Y N
Reason for leaving _____

VOLUNTEER HISTORY

List current and previous volunteer positions in chronological order starting with most recent.

Attach additional sheets as needed.

1. Dates of Service: From _____ To _____
Organization Name & Contact Person _____
Street Address _____ City & State _____
Work Performed _____ Involving minors? Y N
Reason for leaving _____
2. Dates of Service: From _____ To _____
Organization Name & Contact Person _____
Street Address _____ City & State _____
Work Performed _____ Involving minors? Y N
Reason for leaving _____
3. Dates of Service: From _____ To _____
Organization Name & Contact Person _____
Street Address _____ City & State _____
Work Performed _____ Involving minors? Y N
Reason for leaving _____
4. Dates of Service: From _____ To _____
Organization Name & Contact Person _____
Street Address _____ City & State _____
Work Performed _____ Involving minors? Y N
Reason for leaving _____

DRIVING INFORMATION

Do you have a current driver's license? YES NO

If yes, list your driver's license number: _____ State _____

How many tickets have you received for moving violations during the past five years? _____

What specifically were the tickets for? _____

Do you have current liability insurance on your car? YES NO

Name of auto insurance carrier: _____ Policy # _____

REFERENCES and BACKGROUND INFORMATION

Do not list or relatives

1) _____
Name Relationship

_____ Address Phone

2) _____
Name Relationship

_____ Address Phone

3) _____
Name Relationship

_____ Address Phone

1) Has anyone ever brought or threatened to bring a civil or criminal claim against you alleging physical or sexual abuse or sexual harassment by you? YES NO

If yes, give an explanation of the complaint. Indicate the date, nature, and place of the incident leading to the complaint, where the complaint was filed, and the disposition of the complaint.

2) Have you ever been arrested, indicted, a defendant in a trial, or have ever admitted to committing a misdemeanor or felony, or have any outstanding warrants? YES NO

If yes, list the offense(s), date(s), outcome(s), and your employer at the time, including your employer's name, address, and telephone number.

3) Have you ever been convicted of any felony or misdemeanor? YES NO

If yes, give an explanation of the incident. Indicate the date, nature, and place of the incident, the disposition of the allegations, and your employer at the time, including your employer's name, address and telephone number.

4) Has any employer ever disciplined you or terminated your employment or have you ever terminated your own employment for reasons related to physical or sexual abuse by you, sexual harassment by you, your unsafe driving, or your theft? YES NO

If yes, give an explanation of the allegations. Indicate the date, nature, and place of the allegations, the disposition of the allegations, and your employer at the time, including your employer's name, address, and telephone number.

APPLICANT'S DECLARATION, AUTHORIZATION, AND RELEASE

My answers on this application and on any resume I provide are complete and true. I understand that the submission of any false or incomplete information in connection with my application, whether on this or other documents or in interviews, will be cause for the rejection of my application or the termination of my service at any time. I authorize the Diocese of Colorado Springs and its parishes and/or schools to verify any information related to my application or resume. I also authorize all individuals, schools, employers, organizations, and law enforcement officials to freely release any information concerning my background, and I hereby release any and all of them from any liability for doing so.

 Print Name

Signature Date