



Volunteer Application Biographical Information

Name _____ E-mail _____

Address, City, State, Zip _____

Church You Attend – not mandatory _____ Date of Birth _____ Gender _____ Marital Status _____

Primary Phone Number & Type Home Work Cell Secondary Phone Number & Type Home Work Cell _____

Emergency Contact Name / Number _____

Highest Educational Level Completed: some high school high school some college college graduate post-graduate

Employer/School Attending _____ Occupation/Job _____
Title _____

List any professional certifications and/or skills _____ Bilingual: Yes / No _____ Language(s) _____

How did you hear about M-POWER Ministries? _____

I would like to volunteer in: (check all that apply):

Medical Clinic _____	Dental Clinic _____	Afterschool Program _____	Adult Literacy _____	CMJC® _____	CWJC® _____
Children's Summer Programs _____ M-POWER Office (clerical/administrative) _____ Other _____					

Consent, Authorization, and Release for Photograph and Video (including audio)

I consent to the use and copyright of a photograph and/or video (including audio), in which I am included for use in publications of M-POWER Ministries, Inc. I acknowledge that M-POWER Ministries, Inc. is the sole owner of this photograph and/or video (including audio) in which I am included and can use it as well as any printed matter related to the photograph and/or video (including audio). I release M-POWER Ministries, Inc. and its legal representatives from any legal responsibility related to the photograph and/or video (including audio) in which I am included. Initials _____

My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct.

Signature / Parent or guardian's signature if applicant is under 18 _____ Date _____

FOR OFFICE USE ONLY: _____ WC _____ CC _____ TY



Volunteer Application

Background Check

Name _____

Address, City, State, Zip _____

Background Check Information

I certify that the information in this Volunteer Application is true, correct and complete to the best of my knowledge. I authorize M-POWER Ministries to verify any and all information I provided by contacting appropriate sources. I understand that for the protection of clients, volunteers and staff, all adults (age 18 and up) must voluntarily authorize a background check and I hereby authorize such background check. Your answers to the following questions do not automatically disqualify you from volunteering.

Do you know of any reason(s) that you might not be able to obtain a clear background check? Yes / No

If yes, please explain: _____

Have you ever been convicted of a felony? Yes / No

If yes, list the conviction and date _____

Have you ever been convicted of child abuse or sex-related crimes? Yes / No

If yes, list the conviction and date _____

Within the last 5 years, have you been convicted of, or ended a period of incarceration resulting from, a conviction for a misdemeanor other than first convictions for drunkenness, simple assault, speeding, a minor traffic violation, an affray, or disturbing the peace? Yes / No

If yes, list the conviction and date _____

Waiver and Release of Liability

In consideration of being allowed to volunteer my services at M-POWER Ministries, I hereby acknowledge that there are certain risks of injury involved, and I knowingly and freely assume all such risks and assume full responsibility for my participation. To the extent allowed by law, I agree to indemnify and hold harmless M-POWER Ministries, its officers, employees, agents, representatives and volunteers, of all liabilities and all loss or damage to person or property which may occur or be incident to my involvement or participation.

Volunteer Confidentiality Agreement

I recognize that as a volunteer of M-POWER Ministries, I may have access to confidential information concerning M-POWER, its guests, clients, agents, employees, volunteers or representatives. In consideration of any volunteer status with M-POWER I agree I will not at any time, during or after volunteering for M-POWER, divulge or reveal to any person, firm, or corporation, any information (including, but not limited to, personal or financial information or donor lists), directly or indirectly, which might in any way be used to injure or interfere with the business or ministry of M-POWER, or to alienate guests, clients, agents, employees, volunteers or representatives from M-POWER or to cause discontent or dissatisfaction among any such persons.

I agree that should I have any questions as to the propriety of release of any information, I will request clearance from M-POWER.

I AM IN AGREEMENT WITH THE TERMS OF ALL THREE PRECEDING SECTIONS. Initials _____

Signature _____

Date _____

FOR OFFICE USE ONLY: _____WC _____CC _____TY

Revised 9/26/09