

**COMMON GRACE MINISTRIES, INC.**

Volunteer Application

Application Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

APPLICANT INFORMATION		
Last Name:	First:	MI:
Street Address:		Apartment/Unit #:
City:	State:	Zip:
Phone:	Cell Phone:	Email:
Date Available:		
<b>Position Applied For:</b>		
Are you a citizen of the United State? YES <input type="radio"/> NO <input type="radio"/>		If no, are you authorized to work in the U.S.? YES <input type="radio"/> NO <input type="radio"/>
Have you ever been convicted of a crime? YES <input type="radio"/> NO <input type="radio"/> If yes, please explain:  <i>Persons being considered for hire or as a volunteer at Common Grace Ministries, Inc. must submit to a criminal background check, however, the existence of a criminal record does not necessarily constitute an automatic bar to employment or volunteer position.</i>		
Are you able to perform the essential functions of the job position with or without reasonable accommodation? YES <input type="radio"/> NO <input type="radio"/>		
Who referred you to Common Grace Ministries?		

EDUCATION & SKILLS	
<b>High School:</b>	Address:
Did you graduate? YES <input type="radio"/> NO <input type="radio"/>	Year of graduation:
<b>College:</b>	Address:
Did you graduate? YES <input type="radio"/> NO <input type="radio"/>	Degree Earned:
<b>College:</b>	Address:
Did you graduate? YES <input type="radio"/> NO <input type="radio"/>	Degree Earned:
<b>Other Training:</b>	Credential Earned:

**YOU MUST COMPLETE THE FOLLOWING:** List any other skills that may be useful for the position you are seeking. Enter the number of years of experience, and circle the number which corresponds to your comfort level with each particular skill. (1 = less comfort and 5 = very comfortable)

\_\_\_\_\_

Skill:	Years of Experience:	Comfort Level:
<input type="radio"/> Rapport Building with Underprivileged	_____	1 2 3 4 5
<input type="radio"/> Working with Legal / Compliance Issues	_____	1 2 3 4 5
<input type="radio"/> Management of Volunteers	_____	1 2 3 4 5
<input type="radio"/> General Office (Incl. Microsoft Office, multimedia)	_____	1 2 3 4 5
<input type="radio"/> Understanding of Nonprofit Structure	_____	1 2 3 4 5

<b>EMPLOYMENT HISTORY (If currently retired, please list previous employers)</b>	
<b>Company:</b>	Phone: (     )
Address:	Supervisor:
Job Title:	May we contact your supervisor? YES <input type="radio"/> NO <input type="radio"/>
From:                      To:	Reason for Leaving:
Primary Responsibilities:	

<b>Company:</b>	Phone: (     )
Address:	Supervisor:
Job Title:	May we contact your supervisor? YES <input type="radio"/> NO <input type="radio"/>
From:                      To:	Reason for Leaving:
Primary Responsibilities:	

<b>EMERGENCY CONTACT</b>	
<b>Full Name:</b>	Relationship:
Cell Phone: (     )	Alternate Phone: (     )

<b>REFERENCES: Please list two references who are not family members.</b>	
<b>Full Name:</b>	Relationship:
Company/Organization:	Phone: (     )
Address:	
<b>Full Name:</b>	Relationship:
Company/Organization:	Phone: (     )
Address:	

**What do you feel you could bring to Common Grace Ministries as a volunteer?**


**CERTIFICATION AND SIGNATURE:**

*It is the policy of Common Grace Ministries, Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, gender, national origin, age, disability or veteran status.*

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences immediate termination.

I authorize Common Grace Ministries, Inc. to contact former employers regarding my employment. I authorize my former employers to fully and freely communicate information regarding my previous employment and attendance. I authorize those persons designated as references to fully and freely communicate information regarding my character and previous employment.

I understand that Common Grace Ministries, Inc. is a Christ-Centered ministry and adheres to a statement of faith. I understand that by signing this application, I am indicating that I have read and will follow the statement of faith.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

<b>APPLICANT SIGNATURE</b>	<b>DATE</b>