

VOLUNTEER APPLICATION

Date: _____

Thank you for sowing your time, talent and gifts into the work of the ministry. Please note, assignments are on an as needed basis and you will be notified when your assistance is needed.

Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State Zip Code

Occupation: _____ Place of Employment: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Email Address: _____

Birth Date: _____ What is the best time to contact you? _____

Education: [] High School [] Master's [] Some College
[] Bachelor's [] Doctorate [] Other _____

Date Joined BOLCC: _____ Ministry of Helps Status: _____

Ministries currently serving in: _____

Place "X" next to the days of the week that you are available and the times. Please circle "AM" or "PM" for the time. Ex: Monday – 9:00 AM to 2:00 PM

_____ Monday	_____ AM/PM	to _____ AM/PM
_____ Tuesday	_____ AM/PM	to _____ AM/PM
_____ Wednesday	_____ AM/PM	to _____ AM/PM
_____ Thursday	_____ AM/PM	to _____ AM/PM
_____ Friday	_____ AM/PM	to _____ AM/PM
_____ Saturday	_____ AM/PM	to _____ AM/PM

Please list your skill sets (i.e., data entry, typing, cleaning, accounting, maintenance, etc.)

Broadcasting

Clerical

Culinary

Facility Service

Publishing

MIS/Digital Media