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| Mt. Carmel Baptist Church | Volunteer Application |

## Contact Information

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Home Phone |  |
| Cell Phone |  |
| E-Mail Address |  |

## Availability

### During which Sundays would you like to teach Sunday School? (Check all that apply)

|  |  |
| --- | --- |
| Only 1st Sundays | Only 4th Sundays |
| Only 2nd Sundays | Only \_\_\_\_\_\_\_\_\_ Sundays a year |
| Only 3rd Sundays | I’m flexible, willing to teach whenever needed |

## Interests

### Tell us which age group(s) that you would be willing to work with. (Check all that apply)

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| --- |
| Babies (Children ages 3 and below) |
| Little Ones (Ages 4-6) |
| 1st & 2nd graders (Ages 7-9) |
| Tweens (Ages 10-13) |
| Teens (Ages 14-17) |
| College Ages (Ages 18-24) |
| Career Ages (25 and above) |
| I would like to be a hallway greeter |

## Special Skills or Qualifications

### Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports that would help to make the Youth Department better.

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## Previous Volunteer Experience

### Summarize your previous volunteer experience.

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## Person to Notify in Case of Emergency

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Home Phone |  |
| Work Phone |  |
| E-Mail Address |  |

## Agreement and Signature

### By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

### Thank you for completing this application form and for your interest in volunteering with us.