

MY SISTER'S HOUSE

for girls

Volunteer/Intern/Staff Application Form

(Please Print)

Date: _____

Position applying for: _____

Last Name:		First:	Initial:	Maiden:
Address:				
City:		State:	Zip:	
How long at above address?	How long have you lived in Ohio?		How were you referred to MSHFG?	
Previous Address: (if you have moved within the past 3 years)				
City:		State:	Zip:	
Home Phone:		Work Phone:		
Email Address:		Cell Phone:		
Facebook Account:		Linkedin Account:		
Drivers License Number & expiration (include state issued):		Social Security Number:	Date of birth:	

EMPLOYMENT HISTORY

Dates	Employer	Position	Skills & Experience

REFERENCES

Please list 3 personal or spiritual references you have known for at least one year. (No family members please)

Name	Address	Zip	Phone Number

In case of an emergency whom would you like us to contact? Please list two options.

Name:	Phone:
Name:	Phone:

AREAS OF INTEREST

Please select specific areas of interest or experience:

- Mentoring
- Marketing
- Videographer
- Media/News
- Spiritual leader
- Special Events
- Education
- Music / Acting
- Graphic Design
- Volunteer serv.
- Grant Writer
- Fundraising
- Workshop Development
- Other: _____

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The following information will be kept confidential.

Other than a minor traffic violation, have you ever been arrested or convicted of any crime

No Yes If yes, briefly explain:

Are you or have you ever been the subject of a child abuse or mistreatment case, or been penalized for mistreatment of a child?

No Yes If yes, briefly explain:

Please describe the experience, skills, talents or qualities that make you a good candidate for this program (include previous volunteer experience):

What concerns do you have regarding being a volunteer?

What do you hope to accomplish in being a volunteer?

Please provide a statement of your faith:

Please indicate your preferred level of participation:

Short-term Long-term Project Internship

Please indicate your availability:

Weekdays Evenings Saturdays Projects Only
M/T/W/Th/F M/T/W/Th/F Mornings/Afternoons

Are you willing to faithfully commit a minimum of twelve months to this program? Yes No
If no, how much time are you willing to commit?

If seeking hands on opportunity, with which age group do you prefer to work?

Elementary School Middle School High School

Please indicate your shirt size: Small Medium Large X-Large 2XL Other

Are you willing to pay a \$20 administrative fee to help offset the cost of a criminal background check & liability insurance?

Yes No

I understand that as a part of the volunteer verification and matching process, additional personal information may be required of me through an interview with My Sister's House for Girls professional staff. I certify that my statements in this application are true, complete and correct to the best of my knowledge and belief. I hereby authorize My Sister's House for Girls to contact the references listed and to conduct whatever investigation and background checks are necessary to determine if I will be an approved volunteer. I also hereby authorize My Sister's House for Girls, without limitation, to copy, publish, exhibit or distribute photographs or video tapes of my volunteer activities for the purpose of promoting volunteerism. I release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless My Sister's House for Girls and the officers, employees and volunteers thereof.

Signature: _____ Date: _____

Primary: _____ Secondary: _____ Ref: _____ O/L D/B: _____ Act D/B: _____