

**VOLUNTEER APPLICATION**

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| --- | --- | --- | --- |
| Full Name: |  |  |  |
|  | Last | First | M.I. |
| Address: |  |  |  |
|  | Street Address |  | Apartment/Unit # |
|  |  |  |  |
|  | City | State | ZIP Code |
| Date of Birth: |  | Cell Phone: |  |
| Marital Status: |  |  ~~If Married,~~ Spouse’s Name: |  |
| Occupation: |  | Previous Occupation: |  |
| Education:  |  | Languages: |  |
| Email Address: |  |

How did you first become aware of Education for Life?  |
| Briefly state what makes you interested in volunteering with Education for Life. |
| Do you consider yourself a Christian? [ ]  yes [ ]  no  |
| Give a brief description of how you came to know Christ as your personal Savior and Lord.How has your life changed since your personal relationship with Jesus Christ began? |
| Please describe how you stay active and growing in your faith. |
| Church membership:  |
| Length of membership and involvement:  |
| Pastor’s name:  |
| Describe volunteer positions within your church/community you have served in or are currently serving.  |
| List any special training, Biblical studies, or educational experiences. |
| There are many volunteer opportunities at Education for Life. Briefly state what area(s) you would be interested in serving. |
| How does your spouse/family feel about your involvement? |
| Have you ever counseled a woman who was considering an abortion? Yes [ ]  No [ ] Explain:  |
| Have you ever had an abortion or had any traumatic experiences related to abortion? *(This information will be kept completely confidential)* Yes [ ]  No [ ] Explain:  |
| If so, are you willing to attend our abortion support group offered before counseling a woman in an unplanned pregnancy?  |
| What special gifts, talents or personality traits do you bring to this ministry? |
| What are your personal strengths? |
| What areas need improvement? |
| Are there any personality types that you have difficulty dealing with? |
| Would it be difficult for you to work with other Christians of different theological beliefs? |
| Please make a general evaluation of your knowledge in the following areas:* 1. Knowledge of how abortions are performed and methods used

[ ]  excellent [ ]  good [ ]  fair [ ]  poor* 1. Knowledge of existing laws regulating abortion

[ ]  excellent [ ]  good [ ]  fair [ ]  poor* 1. Knowledge of biblical teaching on the sanctity of human life

[ ]  excellent [ ]  good [ ]  fair [ ]  poor |
| Under what circumstances would you consider abortion as an alternative for a woman with an unplanned pregnancy? |
| Are you willing to share the gospel when appropriate? Click here to enter text.Describe your experience in sharing the Gospel: |
| References: Please list persons who are not related to you and who have known you for at least two years, including your pastor. |
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| --- | --- | --- | --- |
| Reference 1: |  |  |  |
|  | First Name | Last Name | Address |
|  |  |  |  |
|  | Phone # | Years Acquainted | Relationship |
| Reference 2: |  |  |  |
|  | First Name | Last Name | Address |
|  |  |  |  |
|  | Phone # | Years Acquainted | Relationship |
| Reference 3: |  |  |  |
|  | First Name | Last Name | Address |
|  |  |  |  |
|  | Phone # | Years Acquainted | Relationship |

I certify that the facts set forth in this volunteer application are true and complete to the best of my knowledge, and I authorize Education for Life to verify their accuracy and to obtain reference information concerning my character and capabilities. I release Education for Life and any person or entity providing such reference information from any and all liability relating to the provision of such information or relating to any decisions made based upon such information. Additionally, by submitting this application, I agree to a criminal background check. If I become a volunteer at Education for Life, I agree to fully adhere to its policies and rules, including those rules relating to maintaining client confidentiality. I further certify that I have read and am in full agreement with Education for Life’s Mission Statement, Statement of Faith and Code of Christian Conduct. I understand that if I am hired by Education for Life, I will be held to these statements and will be required to affirm them annually.I recognize that, as a volunteer, I will serve in a different role than the employees of Education for Life, and I am not seeking, nor expecting to receive, any compensation or other benefits in return for any volunteer services.Signature of applicant: Date:  |
| *Please complete this form and email it to us at info@educationforlife.org or print and drop it off at our office: 1701 E Silver Springs Blvd., Ocala, FL, 34470.* |
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