



VOLUNTEER APPLICATION FORM

This form is to be completed, signed and returned to the appropriate Parish Ministry Director or School Office that you wish to provide volunteer services for. A copy of this completed form will be kept on file. Please print clearly.

Name (First) _____ (Middle) _____ (Last) _____

Street Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email Address _____

Are you 18 years of age or older? _____ Yes _____ No

Have you ever volunteered for a school, parish or agency *within* or *outside* of the Diocese of Joliet? If so, give details. _____ Yes _____ No

Please specify the area(s) you are interested in volunteering for.

Parish Ministries

School Activity

Religious Education

Youth Ministry

Please "x" your availability below.

Morning Afternoon Evening

Weekdays

Weekends

Please indicate the beginning date of your availability.

Date

St. Raphael Volunteer Application Form (continued)

VOLUNTEER ACTIVITIES: Please list all current and previous volunteer activities *beginning* with your current or most recent position. Use additional pages if needed. Include any other names worked under if different from the name you use on this form.

From _____	To _____	Phone _____
_____ <i>Parish/Company/Organization Name</i>		_____ <i>Address/City/State/Zip</i>
<u>Description of Duties/Responsibilities:</u>		

From _____	To _____	Phone _____
_____ <i>Parish/Company/Organization Name</i>		_____ <i>Address/City/State/Zip</i>
<u>Description of Duties/Responsibilities:</u>		

From _____	To _____	Phone _____
_____ <i>Parish/Company/Organization Name</i>		_____ <i>Address/City/State/Zip</i>
<u>Description of Duties/Responsibilities:</u>		

IMPORTANT – PLEASE READ AND SIGN BELOW

The information provided on this form is true and complete. If accepted as a volunteer, any misstatement or omission of fact on this form may result in suspension of my services. I grant permission to check my background and references and release the Diocese of Joliet and all Diocesan locations from any and all liability that may result. I further understand that all persons who will have contact with children or vulnerable adults are required to comply with Diocesan Safe Environment policies and procedures and are required to undergo a state and federal criminal background check.

Print Name

Signature

Date