



Volunteer Application 2017-18

Today's Date: _____

General Information

Name: _____
(First Name) (MI) (Last Name)

Address: _____
(Street) (Unit/Apt#)

(City) (State) (Zip Code)

Primary Phone #: _____ Alternate Phone #: _____
 cell home work cell home work

E-mail address: _____

Date of Birth: _____ Gender: Female Male Other
(MM/DD/YYYY)

Ethnicity: African-American Asian American Caucasian Hispanic
 Multi-Racial Native American Other: _____
 Prefer not to identify

Marital Status: Single Divorced Married Widowed Co-habitat with partner

Do you regularly attend a worship or religious service? Yes No
If yes, please provide the name and location of the church, synagogue, mosque, etc.:

Skills/Talents/Hobbies

Everyone has a special gift (skill or talent) and a hobby or two. Please list your gifts and hobbies:

Additional Information

Please answer the following questions:

How did you hear about Step By Step? _____

Why do you want to volunteer at Step By Step? _____

What do you hope to gain from your volunteer experience at Step By Step? _____

How much time can you commit on a monthly basis? _____

Do you have previous volunteer experience? Yes No

If yes, please tell us with what organization and what your role or volunteer duties were:

Have you ever been charged with or convicted of a crime? Yes No

If yes, are you willing to discuss this with the Director? Yes No

Volunteer Opportunities

Please indicate below where you would like to serve. Also, please note roles in *italics* and marked with an asterisk (*) are Leadership Roles and all volunteer applicants seeking a leadership role must complete the Supplemental Application for Volunteer Leadership Roles.

Program Night Team

- Van Driver
- Support Group Co-Leader
- *Child Care Room Leader
- Child Care Room Volunteer
 - Infants
 - Toddlers
 - Elementary Age
- *Session Leader
- *Drama Team Leader
- Clean Up Crew

Hospitality Team

- First Impressions
- Meal Coordinator
- Prepare/Serve a Meal
- Hospitality Task Force

Mom's Support Team

- *Support Group Leader
- * Mentor

Prayer Team

- *Prayer Team Leader
- Prayer Team Member

Other Volunteer Opportunities

- Church and Community Partner Liaison
- Digital Marketing Team

Special Events

- Christmas Store (December)
- Step Into Beautiful (March)
- Housewarming Party (April)

Applicant's Statement

I certify that the information contained in this application is true and correct to the best of my knowledge. I understand that completing and submitting this application does not guarantee placement. After review and acceptance of my application I will be required to attend and participate in volunteer training sessions as set forth and provided by Step By Step, Inc. ("SBS"). I also agree to provide any additional information required by SBS to ensure a safe and responsible volunteer experience for myself, and those that I serve.

Applicant's Signature

Date Signed

Printed Name of SBS Representative Reviewing Application

SBS Representative Signature

Date Signed

Consent and Liability Waiver

I recognize there are risks involved in participating in Step By Step sponsored activities, child care, transportation and/or food. I waive, release, absolve, indemnify, and hold harmless Step By Step, Inc., its volunteers, staff and representatives, and Immanuel Baptist Church from any and all claims for damages of any kind for personal injury to myself or any minor I am responsible for, for any property damage, or any other loss sustained. I further understand that Step By Step does not provide medical insurance or premises insurance, nor any form of medical care or treatment to its participants. I understand that Step By Step will not be liable for any damages or expenses incurred as a result of injury, illness, loss, or damage to person or property while attending Step By Step activities.

Printed Name of Applicant/Volunteer

Applicant/Volunteer Signature

Date Signed



Background Authorization Form

Please print legibly and when asked for full legal name please be sure to provide first, middle and last name. Illegible and incomplete forms cannot be processed and will delay your ability to serve with SBS.

Full Legal Name

Maiden or Alias Names

Home Phone Number

Other Phone Number

Social Security Number

Date of Birth

Email Address

Permanent Address

Street Address/P.O. Box

City State Zip

School/Other Address (if different from permanent address/living away from home)

Street Address/P.O. Box

City State Zip

Signature

Date

