

Office Use Only**Date Begun:****Position:**

Love In the Name of Christ, Lewis County

P.O. Box 152

Chehalis, WA 98532-0152

360.748.8611

Intake.loveinclc@gmail.com

Hours: 10:00am – 1:00pm

Tuesday - Thursday

**VOLUNTEER APPLICATION**

NAME:	Phone:	Email:	
Address:		City:	Zip:
Date of Birth:			
What Church do you Attend:			
Member: <input type="checkbox"/> Yes <input type="checkbox"/> No		How many years?	
Pastor's Name:			

Please provide three (3) reference, NOT family or Pastor (Pastor will be contacted

Name:

Phone:

Name:

Phone:

Name:

Phone:

Reason for Volunteering:

Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated
Education: (List highest grade completed)
Brief Employment History:
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No
What are your interests and hobbies?

Have you ever had experience with any of the following? Mental health problems and/or treatment Domestic Violence Drug or alcohol abuse and/or treatment

If yes, please explain:

At difficult times in your life, to whom do you go for help/support?

**LOVE In the Name of Christ, Lewis County
Statement of Faith**

I believe in God, the Father Almighty, Creator of heaven and earth.

I believe in Jesus Christ, His only Son, our Lord.

He was conceived by the power of the Holy Spirit and born of the Virgin Mary.

He suffered under Pontius Pilate, was crucified, died, and was buried.

On the third day, He rose again.

He ascended into Heaven and is seated at the right hand of the Father.

He will come again to judge the living and the dead.

I believe in the Holy Spirit, the holy Church universal, the communion of the saints, the forgiveness of sins, the resurrection of the body, and the life everlasting. Amen.

ADDITIONALLY, I believe that the only way to salvation is through a personal relationship with Jesus Christ, as Lord and Savior. AND, I believe the Bible to be the inspired, the only infallible, authoritative Word of God.

Affirmation of Agreement with this Statement of Faith

I affirm that I personally agree with this Christian Doctrine and that I attempt to conduct my life in accordance with these Truths. While sharing my Christian testimony or beliefs with anyone whom I am attempting to serve under Love INC, I will do so in view of these basic Scriptural concepts. (Please attach a short paragraph of your personal testimony)

Print name

Signature

Date

Confidentiality Agreement and Background Check

- We regard our positions and ministries as a sacred trust and each client as valuable. Therefore, we do not discuss client matters with those not involved in the helping process.
- All volunteers are required to sign a confidentiality agreement before working with any clients.

I will protect the confidentiality of all individuals who may request service through Love, INC. I agree that I will not disclose or discuss information regarding any client, or client's circumstances, except by permission of the client, to any unauthorized person or persons outside of my sphere of service.

Also, I understand and give permission for Love INC to make a background check on me for the last ten years in Washington State.

Signature

Date



Love In the Name of Christ, Lewis County Background Verification Release Form

Love In the Name of Christ is committed to mobilizing the church to transform lives and communities In the Name of Christ. In pursuit of this excellence, we require consent to and authorization of verification of your background, including information submitted on your application or resume.

APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

This release, and authorization acknowledges that Love In the Name of Christ may conduct and/or receive a criminal history record search including information pertaining to me which may be in the files of any Federal, State, or Local criminal justice agency.

I authorize the results of this verification process to the designated authorized representatives of Love In the Name of Christ of Lewis County.

I have read and understand this release and consent, and I authorize the background verification.

I authorize agencies to provide all the information that may be requested. I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I do hereby agree to forever release and discharge Love In the Name of Christ of Lewis County to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from the retrieving and reporting of information. According to the Federal Fair Credit Reporting Act, upon written request, I am entitled to know the information obtained and to receive a disclosure of the public record information and of the nature and scope of the investigative report.

Upon request, I will be given a summary of my rights under the Fair Credit Reporting Act.

CONFIDENTIAL INFORMATION FOR POSITIVE IDENTIFICATION PURPOSES ONLY

Applicant Name Typed or Printed

Signature

Date of Birth

Address

Driver's License Number—State DL issued.

Maiden Name (or other last names)

Date