



St. Angela Merici Parish

VOLUNTEER APPLICATION

PLEASE PRINT

Name _____ Date _____
Last First M.I.

Address _____
Number Street

City State Zip

Phone (____) _____ Number to Call in Case of Emergency (____) _____

Email _____

GENERAL INFORMATION

Are you presently employed? _____ If yes, place of employment _____

Have you ever been employed by St. Angela Merici Parish? _____ If yes,
please list position and date...

Have you previously volunteered at St. Angela Merici Parish? _____ If yes,
please list volunteer positions(s) and dates(s)...

What type of position are you currently applying for _____

Hours and days available to volunteer _____

Date available to start _____

Have you ever been convicted of, found guilty of, or entered a plea of no contest or
guilty to a crime, other than a minor traffic offense? _____ If yes, please explain...

PLEASE RESPOND TO THE FOLLOWING TO HELP US KNOW YOU BETTER

Degrees, certifications, special skills, licenses or other qualifications that may be helpful in your volunteer position: _____

PERSONAL AND PROFESSIONAL REFERENCES (*Three required by Diocesan standards*)

Name & Occupation	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

APPLICANT'S STATEMENT

I certify that all information provided in this volunteer application is true and complete. I understand that any false information or omission may disqualify me from further consideration for a volunteer position and may result in my dismissal if discovered at a later date. I also understand that my completion of this application does not guarantee a volunteer position.

I consent to and permit authorized agents of St. Angela Merici Parish/School to conduct a background check and investigation including, but not limited to, a criminal background check.

I have read, understand, and by my signature consent to these statements.

Signature of Applicant

Date