



Volunteer Application

Date _____

Name _____
First Middle Last Maiden

Present Address _____
Street City State Zip

Cell _____ Alt. Phone _____ E-Mail _____

SSN: ____/____/____ Marital Status _____ Birth Date ____/____/____

Spouse's Name _____ Spouse's Occupation _____

Children's Names & Ages _____

Work Experience _____

Volunteer Experience _____

Hobbies and Interests _____

Education _____ Area of concentration _____

List any special training, Biblical studies, or educational experience:

List other ministries or organizations in which you have been involved:

How did you hear about Life Network?

Briefly state why you are interested in volunteering at Life Network:

What special skills or abilities can you bring to this ministry?

Which days and hours are you able to devote to Life Network weekly?

Monday

Tuesday

Wednesday

Thursday

Hours: _____ Hours: _____ Hours: _____ Hours: _____

List any other days/times you might be available- _____

What area(s) are you interested in?

- Mentoring – *interact with clients, educate in 'parenting' methods, and present Biblical solutions*
- Support Services – *help organize our boutique by sorting, cleaning and stocking donated clothing and offer limited medical services*
- Medical – *licensed medical professionals can receive training to provide pregnancy verifications and answer questions*
- Administrative – *data entry, handyman jobs, assembling mailing and assistance with special events*
- Church Liaison– *be an essential link between your church and Life Network!*
- Advancement– *assisting with event planning, marketing, & fundraising ideas*

Do you consider yourself a Christian? Yes No

Explain what it means to be a Christian:

How long have you been a Christian? _____ Give a statement (testimony) about how you came to know Christ as your personal Lord and Savior:

Are you currently involved in a Bible study? Yes No If yes, how long?

Have you ever counseled someone facing an unplanned pregnancy? Yes No

If yes, explain:

Have you had an abortion or been involved in an abortion? Yes No

If yes, how did this experience affect you?

Under what circumstances would you consider abortion as an alternative for a woman in a crisis pregnancy?

Never an option In cases of rape/incest In cases of severe psychological stress

Other _____

CHURCH REFERENCE

Church name _____ Denomination

Address _____ City _____ Zip

Pastor's name _____ Phone

How long have you attended? _____ Are you in a consistent community with your church? Yes No

Describe areas of involvement, positions held, and services performed within the church:

Church leader reference _____ Position

Phone _____ Email

CHARACTER REFERENCES

Please provide two references who can attest to your character and capabilities. Do not list family members.

Name _____ Relationship _____

Phone _____ Email _____

Address _____ City _____ Zip _____

Name _____ Relationship _____

Phone _____ Email _____

Address _____ City _____ Zip _____

CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this volunteer application are true and complete to the best of my knowledge. I understand that Life Network of Central Missouri utilizes screening tools such as reference and criminal background checks on volunteer applicants. I authorize Life Network to obtain reference information concerning my character and capabilities and to obtain criminal background information concerning any history or charges of criminal behavior. I release Life Network and any person or entity providing such reference and background information from any and all liability relating to the provision of such information or relating to any decisions made based upon such information.

I certify that I have read and agree to uphold Life Network's *Statement of Faith and Beliefs*.

I understand that all information regarding Life Network of Central Missouri, My Life Clinic, and their patients & clients must be kept in the strictest confidence. I agree to keep all information in the strictest confidence in accordance with Life Network's policies and will maintain confidentiality even after I am no longer a volunteer.

Signature _____ **Date** _____

Statement of Faith and Beliefs

WE BELIEVE in one God, eternally existent in three Persons – Father, Son, and Holy Spirit.

WE BELIEVE that Jesus Christ – God the Son and Second Person of the Godhead – is the only begotten Son of God and the express image of God. We believe in His virgin birth and in His sinless life. We believe in His bodily resurrection from the dead to win the victory over death. We believe in His ascension to heaven where He sits at the right hand of the Father.

WE BELIEVE that Jesus Christ is the Lamb of God offered up as a sacrifice to take away the sin of the world. We believe that no one can be saved by any other name than by the name of Jesus.

WE BELIEVE that the Holy Bible is the inspired, eternal, authoritative and infallible Word of God.

WE BELIEVE that all have sinned and fallen short of the glory of God but that, if we confess our sins, God is faithful and just to forgive our sins and to cleanse us from all unrighteousness.

WE BELIEVE in the indwelling of every believer by the Holy Spirit.

WE BELIEVE in the spiritual unity of the Body of Christ, the Church.

WE BELIEVE that the right to life is endowed by the Creator at the time of conception and is an inalienable right; that the unborn child is a living human being from conception, a unique and irreplaceable person known by God. All human life is meaningful and precious from conception until natural death.

WE BELIEVE that abortion is the taking of an innocent life and is never an alternative to an unwanted pregnancy; that it is a violation of God's natural law and a woman's physiological make-up and, therefore, results in various physical and/or emotional scars.

WE BELIEVE that abortion is a transgression of divine principles, but that Jesus Christ offers forgiveness, healing, restoration, and renewing to those touched by, or suffering from, abortion's aftermath.

WE BELIEVE that abortion is not a solution to a true social problem. Women experiencing problem pregnancies need practical love and assistance.

WE BELIEVE that society's pro-abortion ["pro-choice"] mentality is creating a climate of moral degeneration.

WE BELIEVE that God has called us to be a voice for the voiceless and to speak up against injustice.

WE BELIEVE that Life Network has an obligation to minister to those in need and to educate the general public about the effects of abortion.