

LIBERTY MINISTRIES

Grace, Hope, Regeneration
...for those in prison and recently released!

VOLUNTEER APPLICATION

NAME: _____ SS# _____ DOB: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ email Address: _____ US CITIZEN? Yes No

Have you ever been convicted of a crime? Yes No Aliases: _____
Conviction of a crime will not, in every case, cause your application to be disapproved.

If yes, describe the charges and outcome: _____

Where do you attend church? _____ Pastor's Name: _____

Church Address: _____ City: _____ Zip: _____

How long have you attended? _____ Positions Held: _____

How long have you been a Christian? _____

Educational Level: 9, 10, 11, 12 Bachelor's Master's PhD
(circle the highest level you have completed)

Have you ever worked with inmates or ex-inmates? Yes No

If yes, describe where, what you did and for how long: _____

Where would you like to volunteer? In Prison Liberty House Liberty Thrift

In What Capacity? _____ How Often? _____

I verify that the above listed answers are true and correct to the best of my knowledge. I understand and agree that if any answers are determined to be fraudulent I forfeit my opportunity to volunteer for Liberty Ministries. If selected to volunteer I agree to submit to Liberty Ministries Guidelines for Conduct and Statement of Faith. I hold Liberty Ministries harmless for any harm to my person while volunteering and take full responsibility for my actions.

Signature: _____ Date: _____