



Volunteer Application

DATE: _____

Name _____ Date _____

Address _____
Street _____

City _____ State _____ Zip _____

How long have you been a resident of PA? _____

Birthdate _____ Phone Number _____ E-mail _____

Marital Status _____

Place of Employment _____

Work Phone Number _____ OK to call you at work if needed? _____

Please provide the following information about your local church:

Church Name _____

Church Address _____
Street _____

City _____ State _____ Zip _____

Pastor's Name _____

Volunteer Experience (if any) _____

Special skills and/or area(s) of interest _____

Why are you interested in volunteering at the House of His Creation? _____

How does your family view your involvement with this ministry? _____

What is your view of adoption? _____

What is your view concerning single parenting? _____

Do you consider yourself a Christian? _____

If so, please share with us your personal testimony, including when you came to Christ, your definition of a Christian, and what Christ means to you in your daily life.

Signature

Date