

# LAKE REGION CONFERENCE OF SEVENTH-DAY ADVENTISTS VOLUNTEER INFORMATION FORM

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All questions on this form should be answered clearly and completely in your own handwriting. Do not type. If you fail to answer all questions on this form, you will be ineligible to serve as a volunteer. This form should be submitted to \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip

Telephone (\_\_\_\_\_) \_\_\_\_\_  
Residence Other

Have you ever used any other name(s) for work, school or other reasons? If yes, list name(s) and dates/ locations used and circumstances. \_\_\_\_\_

Person to Notify in Case of Emergency \_\_\_\_\_  
Name Telephone

List the functions you are willing to perform as a volunteer:

- 1) \_\_\_\_\_ 3) \_\_\_\_\_  
 2) \_\_\_\_\_ 4) \_\_\_\_\_

Dates and times available for volunteering: \_\_\_\_\_

Current Church Membership (if less than one year, also provide prior Church membership): \_\_\_\_\_

### LANGUAGE(S)

Please list all languages (including English) that you speak, read or write proficiently:

Language	Speak	Read	Write	Comments
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

### VOLUNTEER EXPERIENCE

Please list examples of volunteer service/experience

Type of experience	Organization	Dates of Volunteer Service
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

(use additional sheets if necessary)

### WORK EXPERIENCE

Have you ever been employed by the \_\_\_\_\_ Conference?  Yes  No If yes, provide dates and position(s) held: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Provide information regarding your employment experiences (types, positions held, skills and any certifications):

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Have you ever been discharged or counseled to resign by any employer?  Yes  No

If yes, provide information on employer, date, action and explanation

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Please list below three individuals (excluding family members) who have known you for at least one year and can verify that you are qualified to perform services as a volunteer.

1. Current Pastor \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

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2. Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

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Relationship \_\_\_\_\_ to \_\_\_\_\_ Reference: \_\_\_\_\_

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3. Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

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Relationship \_\_\_\_\_ to \_\_\_\_\_ Reference: \_\_\_\_\_

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## CRIMINAL HISTORY INFORMATION

Unless a time limit is stated in a question, please provide information on ALL convictions, pleas and alternative sentencing or disposition programs that have occurred during your lifetime. Records of offenses by minors (under age 18) are not automatically sealed and should be disclosed, except where non-disclosure is required by state law.

You should disclose any criminal offense that may appear on your record. If you are uncertain of the exact date or how a criminal offense was classified, give the approximate date, your understanding of the criminal offense, and note that you are unsure of any more specific information.

You are not obligated to disclose sealed or expunged records of convictions or arrests in response to the questions on this application.

Have you **EVER** pled guilty to any criminal offense (misdemeanor or felony)?  Yes  No

Have you **EVER** pled *nolo contendere* (no contest) to any criminal offense (misdemeanor or felony)?  Yes  No

Have you **EVER** been convicted of any criminal offense (misdemeanor or felony)?  Yes  No

Have you **EVER** served or participated in any form of alternative sentencing or disposition program (for example, probation, pretrial diversion, or deferred adjudication) for any criminal offense?  Yes  No

Have you ever been charged, accused, convicted, pled guilty, pled no contest or received any form of alternative sentence for any crime involving child or elder abuse or sexual abuse?  Yes  No

If you answered "Yes," to any of these criminal record questions, please provide details in the space provided below:

Date of Offense \_\_\_\_\_

City/County/State \_\_\_\_\_

Nature of Offense \_\_\_\_\_  
\_\_\_\_\_

Disposition \_\_\_\_\_  
(use additional sheets if necessary)

Answering "yes" will not automatically disqualify you from serving as a volunteer. The Lake Region Conference will consider the nature of the volunteer services to be performed, as well as the nature of the criminal offense and the length of time since the criminal offense occurred.

**VOLUNTEER STATUS**

You acknowledge that you have requested to volunteer your services for your individual purposes with no promise or expectation of compensation. You acknowledge that you are not an employee, contractor, or agent of the Lake Region Conference and will not receive any wages or benefits in exchange for your volunteer service.

You may cease to volunteer with the Lake Region Conference at any time. The Lake Region Conference may at any time, with or without prior notice, request that you cease volunteering or that you not participate in specific activities.

Your volunteer services to the Lake Region Conference does not make you eligible for employment. Your volunteer activities will not replace employees of the Lake Region Conference. If you become interested in employment with the Lake Region Conference, you must fulfill the Conference's standard hiring requirements and procedures.

**VERIFICATION**

I acknowledge that I have read and understand this volunteer application form. I verify that the information I have provided on this form is true, correct and complete and contains no omissions. I authorize the Lake Region Conference to review and use information about me that is available on the Internet. I understand that false, incorrect, misleading or incomplete information on this form will result in my being ineligible to serve as a volunteer.

I authorize the Lake Region Conference to confirm information supplied on this volunteer information form. I authorize the Lake Region Conference to review and use information about me that is available on the Internet. I agree to furnish additional information if requested by the Lake Region Conference. I release the Lake Region Conference and all parties and persons from any claims, liabilities and damages that may result from requesting or furnishing information about me and using such information in considering me as a volunteer. This authorization to obtain background information does not include a consumer report under the federal Fair Credit Reporting Act. If the Lake Region Conference conducts a consumer report or background check about me under the federal Fair Credit Reporting Act, I understand that I will receive a separate notice and authorization for that consumer report.

Volunteer Signature \_\_\_\_\_

Date \_\_\_\_\_