

Trinity United Methodist Church

Volunteer Application

Name: _____

Address: _____

Home phone: _____ Cell phone: _____

Occupation: _____

Employer: _____

Previous volunteer experience: _____

Do you have a valid driver's license? Yes No

Do you have auto liability insurance? Yes No

Why would you like to volunteer as a worker with youth?

What qualities do you have that would help you work with youth?

Have you ever been charged with, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, and other crimes of violence, theft, or motor vehicle violations)? No Yes

If yes, please explain fully:

Signature of Applicant and Parent if minor

Date