Blount County Sav-A-Life, Inc. A Place of Hope Pregnancy Center

311 1st Avenue East, Oneonta, AL 35121 205-625-5416

www.bcsavalife.com

VOLUNTEER APPLICATION

Name				
	Last	First	Middle In	nitial
Address				
	Number & street	City	State	Zip code
Phone #		Email:		
Are you ove	er 18 years old?Yes	No Have you ever been	convicted of a crin	ne?YesNo
If yes, expl	ain:			
Education:				
	ol: Number of years comple YesNo	eted (circle one) 1 2 3 4 I	Diploma:Yes _	No
College and	d/or Vocational School: N	umber of years completed (c	ircle one) 1 2 3 4	
Describe otl	her training or degrees			
Previous V	olunteer Experience: Lis	st most recent volunteer exper	rience first.	
Organizatio	n	Date of volunteer	service: From	To
Address				
Position/Du	ities			
Telenhone		Supervisor name		

Organization	Date of volunteer service: From	To					
Address							
Position/Duties							
Telephone	elephone Supervisor name						
Employment History: List most	recent employment first.						
Employer	mployer Date of employment: From To						
Address							
Position/Duties							
Employer	Date of employment: From	То					
	Supervisor name						
Additional Information:							
What is your reason for seeking to v	olunteer here?						
Do you consider yourself a Christian							
If yes, how long have you be	een a Christian?						
Please provide the following information	ation concerning your local church.						
Church name	Denomination						
Address							
Pastor's name	Phone						
Positions in which you have	e served						

This organization is a Christian pro-life ministry. We believe that our faith in Jesus Christ empowers us, enables us, and motivates us to provide pregnancy services in this community. Please write a brief statement about how your faith would affect your volunteer work at this center.						
What special skills, talents, gifts, or personality traits would you						
Have you ever counseled a woman who was considering an abort	tion?Y	/es l	No			
(Explanation)						
Have you had any traumatic experiences relating to abortion?	Yes	No				
(Explanation)						
Have you ever known a single pregnant woman? Yes	No					
Under what circumstances would you consider abortion as an alterpregnancy? Never an option	ernative for a	woman wi	ith an un	planned		
In cases of rape or incest						
In cases where the mother's life was in extreme p	peril					
In cases of extreme psychological distress						
Other (specify)						
Please list any books, films, or other material that you have read opregnancy, or alternatives to abortion.			abortion,			
How would you rate yourself in the following areas?						
a. Knowledge of abortion methods	excellent_	_ good	fair	poor		
b. Knowledge of current laws concerning abortion	excellent	_ good	_ fair	_ poor		
c. Knowledge of what the Bible teaches about abortion	excellent	good	fair	poor		

Are you currently or have	you ever been involved in	seeking to adopt a	child?	_Yes _	No
(Explanation)					
What do you consider to b	-				
Are there any particular po	ersonality types with whor				
References:					
Please list persons who are	e not related to you and wl	no have known you	for at least two	years,	including your
pastor. Name	Address	Phone #	Years acquai	inted	Relationship
1					
2					
<u>A</u>]	PPLICANT'S CERTIFIC	CATION AND AC	GREEMENT		
knowledge, and I authoriz concerning my character a such reference information to any decisions made bas background check to the e become a volunteer at the rules relating to maintaining role than the employees of compensation or other ber	and capabilities. I release to in from any and all liability ed upon such information. extent that my volunteer du pregnancy center, I agree ing client confidentiality. I	verify their accurace the pregnancy center relating to the provide I give permission to titles may involve ditto fully adhere to it recognize that, as a I I am not seeking, unteer services which	y and to obtain or and any person of such it to the center to direct interaction is policies and revolunteer, I will nor expecting to the I may provide	referen on or en nformat conduct with m ules, ind ill serve o receiv le for th	ce information tity providing ion or relating t a criminal ninors. If I cluding those in a different re, any is ministry.
Statement of Faith and Sta		n in tuil agreement	with the pregn	ancy ce	mer s
Signature of applicant			Date		