



Volunteer Application (Confidential)

Personal Information							
LAST Name		FIRST Name			Date (mm/dd/yy)		
Present Address (Street)				City	Province	Postal Code	
Daytime Phone		Evening Phone			Mobile Phone		
Email		Fax		Age Group:		Under 18	18-25
				25-35	35-45	45-55	55+
Spouse's Name (if applicable)					Do you have a valid Driver's License?		
Is your spouse supportive of you joining this ministry?					Yes	No	
					Yes	No	
Name of Church you attend				Pastor's Name and Phone			

Emergency Contact Information <i>(In case of illness or injury)</i>		
FULL Name		Relationship to You
Address	City	Postal Code
Daytime Phone	Evening Phone	Mobile Phone

VOLUNTEER PROFILE

Present Status:

Student	Part Time	Full Time
Currently Employed	Part Time	Full Time
Retired	Not currently employed	Other _____

Hobbies and Interests:

Have you volunteered at Arrow Leadership before? Yes No

If yes, in what area and when? _____

What type of work would you like to do at Arrow Leadership?

Availability							
Days	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Hours Between (to and from AM/PM)							

VOLUNTEER EXPERIENCE		
List all volunteer experiences beginning with the most recent		
Dates (From - To)	Company or Organization	Position and type of volunteer work

EMPLOYMENT HISTORY			
Please list your positions, starting from most recent			
Dates (From - To)	Position	Employer and Location	Type of Work

EDUCATION			
List high schools, colleges, university, graduate, professional, secretarial, vocational, or other specialized training schools which you have attended, beginning with the most recent			
Name of School	Dates attended	Degree & Year Received	Field of Study

REFERENCES: (Non Relative)		
Please provide a list of people that we may contact		
Full Name	Phone	Relationship to you

I understand and agree to abide by Arrow Leadership’s Statement of Faith

I have read Arrow Leadership’s Statement of Faith at www.arrowleadership.org/alpages/about/about-4.shtml

I extend my permission for Arrow Leadership to contact the references that I have listed for the purpose of a background check to evaluate my suitability for the volunteer position I have applied for.

Applicant’s Signature _____
 (A typed in name will indicate the applicant’s signature when emailed by clicking on the submit button below)

Note:

- Completed applications can also be **faxed to 604.576.5629** or mailed to:
Arrow Leadership
201A - 19232 Enterprise Way
Surrey, BC V3S 6J9
- Submitting this application does not obligate the applicant or Arrow Leadership to proceed any further with this application