

**ELIZABETH HOME
VOLUNTEER APPLICATION**

The mission statement of EH is as follows:

Elizabeth Home is a ministry committed to providing Christ-centered hope, nurturing mothers and pregnant women; helping them build a solid foundation leading them to a stable life.

Thank you for your interest in volunteering at Elizabeth Home. We are excited about the prospect of you becoming a part of this ministry. Thank you for your willingness to fill out the following application. Please call us at 309-824-8270 or 815-419-2274 with any questions and we will be glad to assist you in any way.

God bless you as you consider this great opportunity of service to Him!

General Information

Name _____

Address _____

City _____ State ____ Zip _____

Phone _____

Birthdate _____ Marital Status _____

Occupation _____

Education Completion: High School _____yrs. College _____yrs.

We are legally required to run a background check on all potential volunteers. Please provide your Social Security number. This information will remain secure and confidential.

SS. # _____

1. How did you hear about the Elizabeth Home?

2. What are your reasons for considering involvement at Elizabeth Home?

3. In what other Ministries or organizations have you been involved as a volunteer?

4. Are you interested in volunteering at EH in one specific area such as tutoring, doing a Bible study, cooking, transportation, respite, Etc. If yes, please indicate the specific areas of the ministry in which you are interested.

5. What specific gifts, talents or personality traits do you want to bring to EH?

6. Are there any particular personality types with whom you have difficulty working?

7. Would you have a problem with working with women who have? Please circle any that may apply.

- Lost their children to foster care
- Surrendered their children for adoption
- Had an abortion(s)
- Who are HIV positive
- Been incarcerated and have a criminal record
- An eating disorder
- Mental and emotional challenges
- Different ethnicity or culture

Do you believe the only way to salvation and to have a relationship with God is through His Son, Jesus? _____.

Have you accepted Jesus as your savior? _____

Home church

Church attending _____

Denominational affiliation _____

Church address _____

Church phone _____ Pastor's Name _____

How long have you attended this Church? _____

References

Please list at least 2 people, whom you are not related to, that you have known for at least 2 years. **This must include your Pastor.**

Name	Address	Phone #	Yrs. Acquainted	Relationship
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

Please scan & email to: Elizabeth_home2015@yahoo.com

Or mail to: EH
P.O. Box 442
Pontiac, IL 61764