



VOLUNTEER APPLICATION

Your Full Name: _____

Your Nickname or Other:

Your Mailing Address:

City: _____ State: _____ Zip: _____

Your Email: _____

Your Cell Phone: _____

Do you respond to Text Messages? _____

Alternate Phone (with area code):

Website URL (not required): _____

Blog URL (not required): _____

Are You On Social Media: _____

If yes, please list all of your Social Media addresses:

❖ Facebook #1 (all): _____

❖ Twitter #1 (all): _____

- ❖ Instagram (all): _____
- ❖ LinkedIn (all): _____
- ❖ Pinterest (all): _____
- ❖ Google: _____
- ❖ YouTube: _____
- ❖ Other (please list all other social media, website or other internet addresses you manage here or on the back):

The DRM Mission Statement
Saving Souls.
Transforming Lives.
Healing Hearts, Minds and Marriages with The Word

This application is for Deborah Ross Ministries, Inc. and/or for one of their outreach ministries. Please check all that apply. Note that DRM is the nonprofit umbrella for all of these outreaches – plus more:

All DRM Interests

The Woman2Woman Ministry – Reaching, Teaching & Keeping Women for God’ s Glory!

Choose Life TV – Empowering YOU to LIVE in the BLESSING!

Choose Life Radio – Empowering YOU to LIVE in the BLESSING!

Cold Water Prison Ministry – Supporting other ministries by volunteering to reach “the least of these.”

Save It! Marriage Ministry – Saving Marriages. Restoring Families.

Please tell us in 500 words, or less: (use another sheet of paper, as needed)

- 1) Why you want to be on the DRM VOLUNTEER TEAM?
- 2) What you hope to gain by being on the DRM VOLUNTEER TEAM?
- 3) What talents, services, expertise or other benefits you can bring to DRM?

4) Anything else?

Please tell us in 200 words, or less, if any of these apply to you: (use another sheet of paper, if needed)

- 1) If you have any restrictions, reservations, apprehensions or uneasy feelings about being on certain aspects of the DRM VOLUNTEER TEAM and why?
- 2) If there is anything that you would change about the DRM VOLUNTEER TEAM qualifications, expectations, obligations, etc.?
- 3) If there is anything that would hinder you from giving your very best toward the team effort of growing this ministry?

Please Circle Any or All of the Following That Apply:

(Note: you are not required to have any of these attributes)

I am a ...

Speaker Blogger Author Ordained Minister Pastor's Wife Singer Musician

Radio Host TV Host Women's Ministry Director Community Director

Church Employee Chaplain Prison Employee Mentor Mentee

Sunday School Teacher Intercessory Prayer Warrior Friend of Deborah's

Management Other _____

What are your special areas of expertise and/or interest that you would like to volunteer for? Please list all:

Please list all special interest that apply.

(We promise not to overwhelm you with volunteer service, but we do want to know all of the gifts and talents of our volunteer team members for the sake of the professionalism, effectiveness, growth and expansion of DRM.)

Social Media _____ Event Planning _____ Event Hosting _____

Website Management _____ Finance _____ Bookkeeping _____

Vendor Management _____ Promotions _____ Marketing _____
Underwriter/Sponsorship Management _____ Printing _____
Resource Director _____ Team Communication _____ Phone Outreach _____
Direct Mail Outreach _____ Email Outreach _____ Training _____
Benevolence _____ Set-up & Tear-Down at Events _____ Networking _____
Decorating _____ Traveling _____ Book Sales & Resource Table _____
Public Relations _____ Monthly Remnant Partner _____ Fund Raising _____
Grant Research & Writing _____ Corporate/Business Sponsor _____
Advertising/Sales _____ Periodical Traveling Assistant _____ Part Time/Full
Time Traveling Assistant _____

Please list any other special interest that you might have:

Do you work a full-time or part-time job? _____

If so, Name of Company: _____

If so, please tell us what you do:

Are you interested and able to travel with us? _____

Are you able and willing to pay for your own transportation and/or hotel, if needed?

Are you interested in being mentored by Deborah Ross?

Are you interested in mentoring someone else who is assigned to you through this ministry? _____

Are you interested in being a monthly Remnant Partner at the \$25 giving level?

If not, is there another amount of which you would be interested in partnering with this ministry on a monthly basis? \$5; \$10; \$15; \$20; \$50; \$100 Other

“Each of you must bring a gift in proportion to the way the LORD your God has blessed you.”

Deuteronomy 16:17

DRM requires each volunteer to be financial supporter *at some level*. Some of our volunteers give a specific monthly partner amount (2 Corinthians 9:7), while others may choose to dive in deep – bringing all tithes to this ministry (Malachi 3:10).

WHAT WE NEED FROM YOU:

- ✓ **Please have your pastor or spiritual leader email or postal mail us a recommendation letter.** *(This letter must come directly from them and not be handled by you.)*
- ✓ **Please have one other person who knows you that is not a family member send us a recommendation letter.** *(This letter must come directly from them and not be handled by you.)*
- ✓ **If you are employed or if you currently serve as a volunteer somewhere else, please have them send us a recommendation letter?** *(This letter must come directly from them and not be handled by you.)*
- ✓ **If you are not employed or volunteering, please share the Name, Address and Phone Number of someone with whom you have worked or volunteered for in previous years that is not a relative?**

If there is anything else that you feel we should know about you, please share it at the time of turning in this application.

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**DRM  
P.O. Box 2186  
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