VOLUNTEER APPLICATION

Thank you for your interest in volunteering with Eastern Oregon Mission. Volunteers play a vital role in the delivery of our programs which ensure those who are in need have access to our different programs. All applications are reviewed with consideration of current volunteer opportunities available at the Agape House or Martha's House. Preference may be selected below.

| PERSONAL INFO | RMATION | |
|----------------------|---|-------------|
| Name: | Name: Date of birth: | |
| Mailing Address: _ | | |
| City/State/Zip: | | |
| | | |
| GENERAL VOLUM | TEER INFORMATION | |
| How did you hear a | about opportunities at Eastern Orego | on Mission? |
| Which ministry are | you interested in serving? (circle on | e) |
| | Agape House Martha's I | House Both |
| Why do you want to | o volunteer in this ministry? | |
| ☐ Administ☐ Fundrais | ell us in which areas you are interest tration | ms |
| | or skills you have that you feel woul | |
| Any physical limita | tions: | |
| What days and tim | e are you available to volunteer? | |
| | NTEER EXPERIENCE | |
| Organization: | | Dates: |
| Assignments/Dutie | s: | |
| Reference: | Conta | ct number: |

Volunteer Application 1

| Name: | Relationship: E-mail: |
|--|--|
| | |
| | |
| As a volunteer of our organization | on I agree to abide by the policies and procedures. I understand tha |
| As a volunteer of our organization | on I agree to abide by the policies and procedures. I understand that risk and that the organization, its employees and affiliates, cannot |
| As a volunteer of our organization I will be volunteering at my own assume any responsibility for an | on I agree to abide by the policies and procedures. I understand that risk and that the organization, its employees and affiliates, cannot by liability for any accident, injury or health problem which may arise |
| As a volunteer of our organization I will be volunteering at my own assume any responsibility for and from any volunteer work I perfor | on I agree to abide by the policies and procedures. I understand that risk and that the organization, its employees and affiliates, cannot |

Thank you for your interest!

Volunteer Application 2