



VOLUNTEER APPLICATION

Name: _____
Last First Middle Initial

Address: _____
Number & Street City State Zip Code

Email Address: _____

Phone # _____

Education:

1. High School: Number of years completed (circle one) 1 2 3 4
Diploma: ___Yes ___No
G.E.D.: ___Yes ___No

2. College and/or Vocational School:
Number of years completed (circle one) 1 2 3 4 5+
School(s):

_____ Degrees earned:

_____ Describe other training or degrees:

Previous Volunteer Experience: (List most recent volunteer experience first.)

Organization _____

Date of volunteer service: From _____ To _____

Phone Number _____ Supervisor name _____

Organization _____

Date of volunteer service: From _____ To _____

Phone Number _____ Supervisor name _____

Organization _____

Date of volunteer service: From _____ To _____

Phone Number _____ Supervisor name _____

Additional Information:

What is your reason for seeking to volunteer with *Everyone Has a Story Project*? _____

This organization is a Christian based ministry. We believe that our faith in Jesus Christ compels us to share in the ministry of reconciliation and be an active partner in fulfilling hope. The Gospel of Jesus Christ and His love and grace extends to everyone.

Do you consider yourself a Christian? ____Yes ____No

If yes, how long have you been a Christian? _____

Please write a brief statement about how your faith would affect your volunteer work with *Everyone Has a Story Project*? _____

Everyone Has a Story Project's Values:

- Treat Everyone With Dignity
- Take the Time to Learn Everyone's Story

What do these values mean to you? How do you see yourself applying them as a volunteer? _____

The Wyoming Department of Corrections requires Volunteer Training at the prison center. This will require a full day with travel/training.

Are you willing to go through Volunteer Training? ____Yes ____No

The Wyoming Department of Corrections requires a Background Check.

Are you willing to undergo a Background Check? ____Yes ____No

Please familiarize yourself with the Wyoming Department of Corrections **Volunteer Handbook** listed on this website. Once you have been approved, you can proceed with the training at facility. - dates are TBD.

Please return this form via email to: mkhuck@everyonehasastoryproject.org

Or Mail to: Collaborative Connections, Inc., PO Box 4243, Cheyenne, WY 82003